P19000004911

(Requestor's Name)
(Address)
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(riduciss)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
,
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

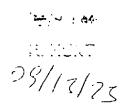
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2023 SEP 13 PH 12: 40



COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORAT	TION: VIALVI HOME S	OLUTIONS INC	
DOCUMENT NUMBER	R:		
The enclosed Articles of A	Amendment and fee are sub	omitted for filing.	
Please return all correspon	ndence concerning this mat	ter to the following:	
Vie	ctor A Alvarez		
		Name of Contact Person	
V	AV HOME SOLUTIONS II	NC	
		Firm/ Company	
55-	44 Berryman St		
		Address	
1.5	HIGH ACRES, FL 33971		
		City/ State and Zip Code	
va	vhomesolutions@gmail.com	າາ	
	E-mail address: (to be us	ed for future annual report	notification)
For further information co	oncerning this matter, pleas	e call:	
Victor A Alvarez		at (239	
Name of C	Contact Person	Area Coo	le & Daytime Telephone Number
Enclosed is a check for th	e following amount made p	payable to the Florida Depa	rtment of State:
□ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amend Divisio P.O. Bo	ment Section n of Corporations ox 6327 ssee, FL 32314	Amend Division The Ce 2415 N	Address ment Section n of Corporations entre of Tallahassee J. Monroe Street, Suite 810 ssee, FL 32303

Articles of Amendment Articles of Incorporation of

VIALVI HOME SOLUTIONS INC				
(Name o	f Corporation as current	ly filed with the Florida Dept. of State)		
P19000004911				
	(Document Number of	of Corporation (if known)		
Pursuant to the provisions of section 607.1 its Articles of Incorporation:	006, Florida Statutes, this	Florida Profit Corporation adopts the following	amendmer	nt(s) to
A. If amending name, enter the new na	me of the corporation:			
WINDOWS FOR LIFE INC			The new	
name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association,"	orp," "Inc." or "Co"	company," or "incorporated" or the abbreviation A professional corporation name must contain "	t "Corp.," the word	
		n/a		
B. Enter new principal office address, (Principal office address MUST BE A S.)	TREET ADDRESS)		- 2	c :
			- 8 3	Si
			<u></u>	77 i 1871
O D	aablar			육화
C. Enter new mailing address, if appli (Mailing address MAY BE A POST of	<u>OFFICE BOX</u>)	n/a	<u>ω</u>	
			0th :21 Hd	
				-
			- 5	
D. If amending the registered agent an	d/or registered office add	fress in Florida, enter the name of the		
new registered agent and/or the new	v registered office addres	<u>:s:</u>		
Name of New Registered Agent	n/a			
	(Florida s	treet address)		
	n/a	. Florida		
New Registered Office Address:		(City) (Zip C	ode)	
New Registered Agent's Signature, if c	hanging Registered Agen	it: with and accept the obligations of the position.		
I hereby accept the appointment as regis	егуа адет 1 ат затиси	with thu accept the obligations of the positions		
	_			
	Signature of New	Registered Agent, if changing		

Check if applicable

The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e). F.S.

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V= Vice President; T= Treasurer; S= Secretary; D= Director: TR= Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT</u>	John Doe	
\underline{X} Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change		n/a	n/a
Add			
Remove			
2) Change			2023, SEP 13
Add			
Remove 3) Change			
Add			PH 12: 40
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)		
n/a		
	2027	0.91413
	2023 SEP 13 PH 2:40	5.
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	<u> </u>	97
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	0	:
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)		
n/a		
		

	09/01/2023	
The date of each amendment(s) adoption:	, if other than the
date this document was signed.	09/01/2023	
Effective date if applicable:	09/01/2023	
	(no more than 90 days after amendme	nt file date)
	is block does not meet the applicable statutory filing repeatment of State's records.	requirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors with	nout shareholder action and shareholder
☐ The amendment(s) was/were by the shareholders was/wer	adopted by the shareholders. The number of votes cast re sufficient for approval.	for the amendment(s)
	approved by the shareholders through voting groups. If for each voting group entitled to vote separately on the	
"The number of votes	east for the amendment(s) was/were sufficient for appro	val 2022
by VICTOR A ALV	AREZ	2023 SEP
	(voting group)	
09/01/ Dated	2023	01 151 Hd
		2 73
Signature		4 0
(By	a director, president or other officer – if directors or offected, by an incorporator – if in the hands of a receiver, pointed fiduciary by that fiduciary)	
	VICTOR A ALVAREZ	
	(Typed or printed name of person signin	ıg)
	OWNER	