## P22000053946

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
M23000090613

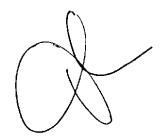
Office Use Only



900406450709

04/21/28--01009--018 \*\*43.75





## FLORIDA DEPARTMENT OF STATE Division of Corporations

June 29, 2023

VIVIANA DOMINGUEZ 5367 TOWER ST DADE CITY, FL 33523

SUBJECT: VIVI MULTI SERVICES AND BOUTIQUE INC

Ref. Number: P22000053946

We have received your document and check(s) totaling \$43.75. However the enclosed document has not been filed and is being returned to you for the following reason(s):

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

Please return your document, along with a copy of this letter, within 60 days of your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Shaunteria Cobbs Regulatory Specialist II

Letter Number: 123A00014718

www.sunbiz.org

0.0 0.01 00.07 50 11 000

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATI	ion: <u>VIV, Mul</u>	-1 Services 1	and Boutque	INC
DOCUMENT NUMBER:	P22000	053946		
The enclosed Articles of Ar	mendment and fee are sul	bmitted for filing.		
Please return all correspond	lence concerning this mat	ter to the following:		
	VIVIC	Name of Contact Person	guez_	
		Firm/ Company		
	<i>5</i> 367 1	Tower st		924 F
	Dade	Address  CLY FL  City/ State and Zip Code  Can 2006 a  ed for future annual report		EB-8 MII: 07
For further information cor	neerning this matter, pleas	se call:		
VI Viana Name of Co	Doming Je	2 at ( Z ) S Area Co	de & Daytime Telephone Nu	mber
Enclosed is a check for the	following amount made p	payable to the Florida Depa	artment of State:	
\$35 Filing Fee	S43.75 Filing Fee & Certificate of Status	S43,75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
	ent Section of Corporations	Amenc Divisio	Address Iment Section on of Corporations entre of Tallahassee	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation

: V.V. Multi Service	es and Boutque INC
(Name of Corporation as currently filed w	nn me riorida Dept. of State,
	53946
(Document Number of Corpora	ation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, this <i>Florida F</i> its Articles of Incorporation:	Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
VIVI Cleaning Services INC	The new
name must be distinguishable and contain the word "corporation," "company, "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A profess "chartered," "professional association," or the abbreviation "P.A."	
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u> )	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  D. If amending the registered agent and/or registered office address in Fl new registered agent and/or the new registered office address:  Name of New Registered Agent	lorida, enter the name of the
(Florida street addres	is)
New Registered Office Address:	. Florida
(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent:  I hereby accept the appointment as registered agent. I am familiar with and a Signature of New Registered	
Signature of New Kegisterea	лдога, у спинуту

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			
X Remove	<u>V</u>	Mike Jones			
X Add	SV	Sally Smith			
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s		
1) Change					
Add					
Remove					
2) Change					
Add				2021	e 2003
Remove Change				Taranta Cara Cara Cara Cara Cara Cara Cara Ca	T
Add					1
Remove				E S	C
4) Change			<del></del>	PATE	
Add					
Remove				·	
5) Change					
			<del></del>		
Remove					
6) Change					
Add					
Remove					

ttach additional sheets, if necessary). (Be specific)	
	<u> </u>
	50 5
	AHAR -8
	NSSE V OF
	mo =
	;m
an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:	
orovisions for implementing the amendment if not contained in the amendment itself:  (if not applicable, indicate N/A)	
(у пот арупсияс, такие ном)	
	···
	. **

The date of each amendment(s) adoption: \_\_\_\_\_\_\_\_, if other than the date this document was signed. Effective date if applicable: (no more than 90 days after amendment file date) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. Adoption of Amendment(s) (CHECK ONE) ☐ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required. The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval. ☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s): "The number of votes cast for the amendment(s) was/were sufficient for approval (voting group) Dated\_ Signature (By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court? appointed fiduciary by that fiduciary) (Typed or printed name of person signing)

(Title of person signing)