P23000043967

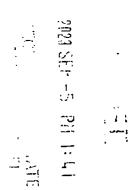
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O: Amendment Section
Division of Corporations

AME OF CORPOR	ATION: VVNN CORP				
OCUMENT NUMB					
	of Amendment and fee are su	bmitted for filing.			
ease return all corresp	ondence concerning this ma	tter to the following:			
1	NGUYEN, VINH V				
_		Name of Contact Person	<u> </u>		
,	VVNN CORP				
-		Firm/ Company			
•	4920 EAST SILVER SPRING	GS BLVD, SUITE 107			
_		Address			
•	OCALA, FL 34470				
_		City/ State and Zip Code			
,	vinhvvnguyen@icloud.com				
-	E-mail address: (to be us	ed for future annual report	notification)		
or further information	concerning this matter, pleas	se call:			
IGUYEN, VINH V		561 at (212 - 4536 de & Daytime Telephone Number	14	2027
Name o	f Contact Person	Area Coo	de & Daytime Telephone Number		2023 SE?
nclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:		1 ()
\$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	TH.	
Amer Divis P.O.	ing Address Indiment Section It ion of Corporations Box 6327 hassee, FL 32314	Amend Divisio The Ce 2415 N	Address ment Section of Corporations entre of Tallahassee N. Monroe Street, Suite 810 ussee, FL 32303		

Articles of Amendment to Articles of Incorporation of

'VNN CORP	
(Name of Corporation as curren	ntly filed with the Florida Dept. of State)
23000043967	
(Document Number	of Corporation (if known)
ursuant to the provisions of section 607.1006, Florida Statutes, the Articles of Incorporation:	is Florida Profit Corporation adopts the following amendment(s)
. If amending name, enter the new name of the corporation:	
	The new
me must be distinguishable and contain the word "corporation," Inc.," or Co.," or the designation "Corp," "Inc," or "Co". chartered," "professional association," or the abbreviation "P.A	A professional corporation name must contain the word
Enter new principal office address, if applicable:	4920 EAST SILVER SPRINGS BLVD, SUITE 107
Principal office address MUST BE A STREET ADDRESS)	OCALA, FL 34470
. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	4920 EAST SILVER SPRINGS BLVD. SUITE 107
	OCALA, FL 34470
	
. If amending the registered agent and/or registered office ac new registered agent and/or the new registered office addre	
Name of New Registered Agent	
	; ; ;
(Florida	street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
	고
ew Registered Agent's Signature, if changing Registered Age hereby accept the appointment as registered agent. I am familia	nt: r with and accept the obligations of the position.
1 minutes	;71
heck if applicable Signature of New	Registered Agent, if changing
The amendment(s) is/are being filed pursuant to s. 607.0120 (1	1) (e), F.S.

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

ttach additional sheets, if necessary)

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

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

hanges 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 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, ike Jones. V as Remove, and Sally Smith. SV as an Add.

change, Mike Jones ike Jones, V as Rem	leaves the c	corporation, Sally Smith is named the V and a lly Smith, SV as an Add.	S. These should be noted as John Doe, PT as a C
rample:			
<u>C</u> Change	<u>PT</u>	John Doe	
<u>⟨</u> Remove	<u>v</u>	Mike Jones	
<u> </u>	<u>sv</u>	Sally Smith	
vpe of Action Theck One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
Change	PD	NGUYEN, VINH V	7294 HEMLOCK LOOP
X Add	-		OCALA, FL 34472
Remove		GUAN NULT	ACCO E CH WITH CHRINGS DI VID
Change	P	CHAU, NHI T	4920 E SILVER SPRINGS BLVD
Add			OCALA, FL 34799
X Remove) Change	М	LAI, KHANG G	4920 E SILVER SPRINGS BLVD
Add			OCALA, FL 34799
X Remove			
Change			
Add			
Remove			ر ة
Change		_	
Add			<u> </u>
Remove			
Change			
Add			
Remove			

nending or adding additional Articles, enter change(s) here: ch additional sheets, if necessary). (Be specific)	
	
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nmendment provides for an exchange, reclassification, or cancellation of issued shares, visions for implementing the amendment if not contained in the amendment itself:	12.C
(if not applicable, indicate N/A)	TANK SER
	(J
· · · ·	
	

he date of each amendment(s) adoption: _ ite this document was signed.		, if other than the
fective date <u>if applicable</u> :		
	(no more than 90 days after amendment file	e date)
ote: If the date inserted in this block does current's effective date on the Department	not meet the applicable statutory filing require of State's records.	rements, this date will not be listed as the
doption of Amendment(s)	CHECK ONE)	
The amendment(s) was/were adopted by the action was not required.	he incorporators, or board of directors without s	shareholder action and shareholder
The amendment(s) was/were adopted by the shareholders was/were sufficient for	he shareholders. The number of votes cast for the approval.	he amendment(s)
* * * * * * * * * * * * * * * * * * * *	the shareholders through voting groups. The foing group entitled to vote separately on the ame	
"The number of votes cast for the an	nendment(s) was/were sufficient for approval	
by	n	
(v	voting group)	
08/29/2023 Dated		
		~~
Signature		
selected, by an in	esident or other officer – if directors or officers acorporator – if in the hands of a receiver, trusted by that fiduciary)	
NGUYE	N, VINH V	PO SE
PD	(Typed or printed name of person signing)	-5 P
<u> </u>	(Title of person signing)	