

P09000057626

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

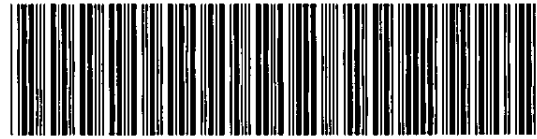
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400242902374

Amend

12/20/12--01004--013 **35.00

FILED
2013 JUL 23 PM 1:13
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

*00789,00524,00671

DR
7/24/13



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 1, 2013

Urbano Barrios
4023 W. Waters Ave.
Tampa, FL 33614

SUBJECT: YOUR SHOES CORPORATION
Ref. Number: P09000057626

We have received your document for YOUR SHOES CORPORATION and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Yosvany Blanco needs to sign the amendment form in the space provided at the bottom of page 4.

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

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

Annette Ramsey
Regulatory Specialist II

Letter Number: 313A00010457

From,

Your Shoes Corp.

4023 W Waters Ave.

Tampa Fl. 33614

Doc # P09000057626

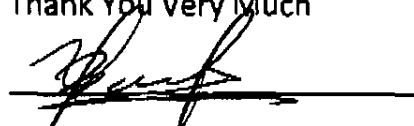
Attn:

Ms. Anette

As per our conversation approximately two weeks ago, I am faxing a copy of a cashed check that was mailed with an amendment around Nov-Dec of 2012, the amendment was not processed but the check was cashed.

We would appreciate Any assistance you can provide in processing the amendment.

Thank You Very Much



Urbano Barrios

813-876-7226

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: YOUR SHOES CORPORATION

DOCUMENT NUMBER: P09000057626

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

YOSVANY BLANCO

Name of Contact Person

YOUR SHOES CORPORATION

Firm/ Company

7045 WEST HILLSBROUGH AVE.

Address

TAMPA, FL. 33634

City/ State and Zip Code

PHOENIXBPG@MSN.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

YOSVANY BLANCO at (**813**) **323-3235**
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

- \$35 Filing Fee
- \$43.75 Filing Fee & Certificate of Status
- \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)
- \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)

Mailing Address
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment
to
Articles of Incorporation
of

YOUR SHOES CORPORATION

(Name of Corporation as currently filed with the Florida Dept. of State)

P09000057626

(Document Number of Corporation (if known))

FILED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

B. Enter new principal office address, if applicable:
(Principal office address **MUST BE A STREET ADDRESS**)

7045 WEST HILLSBOROUGH AVE.
TAMPA, FL. 33634

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 Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent **YOSVANY BLANCO**
7045 WEST HILLSBOROUGH AVE.
(Florida street address)

New Registered Office Address: **TAMPA**, Florida **33634**
(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 accept the obligations of the position.



Signature of New Registered Agent, if changing

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:

Change PT John Doe

Remove V Mike Jones

Add SV Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>D</u>	<u>URBANO BARRIOS</u>	<u>4023 W. WATERS</u> <u>TAMPA FL. 33614</u>
2) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____
3) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____
4) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____
5) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____
6) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____

The date of each amendment(s) adoption: NOV. 8, 2012

Effective date if applicable: _____
(no more than 90 days after amendment file date)

Adoption of Amendment(s) **(CHECK ONE)**

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

by _____
(voting group)

The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.

The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Dated NOV. 8, 2012

Signature *Y Blanco*

(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)

YOSVANY BLANCO

(Typed or printed name of person signing)

DIRECTOR

(Title of person signing)