P090000001191

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SECRETARY OF STATE SECRETARY OF STATE STATES

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COVER LETTER

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TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: FAJAS FA	JATE DISTRIBU	ITION, CORP		
	_{BER:} P0900006119				
	of Amendment and fee are su				
Please return all corre	espondence concerning this ma	tter to the following:			
	JUAN C. ANGEL				
		Name of Contact Person	n		
	FAJAS FAJATE	<u> </u>	, CORP		
	•	Firm/ Company			
	5842 CHESRIRE	COVE TERR	model of the control of		
		Address			
	ORLANDO, FL 3				
		City/ State and Zip Cod	e		
	E-mail address: (to be us	sed for future annual report	notification)		
D 6 4 16 4					
For turtner information	on concerning this matter, pleas	se call:			
JUAN C. AN	GEL	at (407	715-4232		
Name	of Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment 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)		
· · · · · · · · · · · · · · · · · · ·		_			
	iling Address		Address		
	endment Section ision of Corporations	Amendment Section			
	Box 6327	Division of Corporations			
	lahassee, FL 32314	Clifton Building			
1 41	unussee, 1 L 32314	2661 Executive Center Circle			

Articles of Amendment to Articles of Incorporation of

(Name of Corporation as currently	filed with the Flor	ida Dept. of State)	·	_
FAJAS FAJATE DISTRIBUTIO	N, CORP			
(Document Number	of Corporation (if kr	nown)		_
Pursuant to the provisions of section 607.1006, Florits Articles of Incorporation:	ida Statutes, this <i>Flo</i>	rida Profit Corporation ad	opts the followi	ng amendment(s) to
A. If amending name, enter the new name of the	corporation:			
FAJAS U.S SLIMFIT, CORP				The new
name must be distinguishable and contain the w "Corp.," "Inc.," or Co.," or the designation "Coword "chartered," "professional association," or the	rp," "Inc," or "Co	". A professional corpora	rated" or the tion name must	abbreviation contain the
B. Enter new principal office address, if applical (Principal office address MUST BE A STREET AL			·	_
				_
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	3 <i>0X</i>)			_
				_
				<u> </u>
D. If amending the registered agent and/or registered agent and/or the new registered		in Florida, enter the nam	e of the	12 12/18/18/19
Name of New Registered Agent				F
				- SEE
	(Florida street	address)		2 000
New Registered Office Address:		. Florida		STA 0874 9
New Negisiereu Office Audress.	(City)	, 1 totida	(Zip Code)	- 53
New Registered Agent's Signature, if changing R I hereby accept the appointment as registered agent		and accept the obligations	of the position	
a not ear weeeps me appearament as registered agent	um jumuuu 19411	. a accept the conguttons	o, mo posmon	•

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: X Change	<u>PT</u>	John Doe			
X Remove	<u>v</u>	Mike Jones			
X Add	<u>SV</u>	Sally Smith			
Type of Action (Check One)	<u>Title</u>	<u>Name</u>		<u>Addres</u> s	
1) Change Add Remove					
2) Change Add Remove		_ 			
3) Change Add Remove		- . —			
4) Change Add Remove					
5) Change Add Remove					
6) Change Add Remove					

If an amendment provides for an exchange, recl provisions for implementing the amendment if (if not applicable, indicate N/A)						
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11						

The date of each amendme	ent(s) adoption: 02/25/2012
Effective date if applicable	02/2E/2012
<u> </u>	(no more than 90 days after amendment file date)
And the second second	and the second of the second o
Adoption of Amendment(s	(CHECK ONE)
	were adopted by the shareholders. The number of votes cast for the amendment(s) /were sufficient for approval.
	were approved by the shareholders through voting groups. The following statement ided for each voting group entitled to vote separately on the amendment(s):
"The number of vo	tes cast for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
action was not required.	were adopted by the board of directors without shareholder action and shareholder
action was not required.	were adopted by the incorporators without shareholder action and shareholder
Dated_02	2/25/2012
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)
	JUAN C ANGEL
	(Typed or printed name of person signing)
	VP
	(Title of person signing)