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COVER LETTER

Division of Corporations NAME OF CORPORATION: **DOCUMENT NUMBER:** The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Name of Contact Person Firm/ Company Address E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: 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 & **□\$43.75** Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy (Additional Copy enclosed) is enclosed)

Mailing Address

TO: Amendment Section

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			
AML Fabblous, Inc			
Name of Corporation as currently	filed with the Florida Dept. of State		
(Document Number of	Corporation (if known)		
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>I</i> its Articles of Incorporation:	Torida Profit Corporation adopts the following amendment(s) to		
A. If amending name, enter the new name of the corporation:			
NA	The new		
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Coword "chartered," "professional association," or the abbreviation "I	Co". A professional corporation name must contain the		
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	4924 Pembroke Rd W55+ Park, FL 33023		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	4924 Pembroke Ra West Park, FL 33003		
D. If amending the registered agent and/or registered office addre	ess in Florida, enter the name of the		
new registered agent and/or the new registered office address:			
Name of New Registered Agent 4924 Per	noroke Road		
New Registered Office Address: ULS+ Pa	(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.			

Europe State Control of the St

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 <math>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	PT John Doe	
X Remove	<u>V</u> <u>Mike Jones</u>	
X Add	SV Sally Smith	
Type of Action (Check One)	<u>Title</u> <u>Name</u>	Address
1) Change	PD Han E Kibrean	Sc. 4904 Pemboke R
Add Remove		33003
2) Change	VPD Melvin L FROZH	er Upper Pemproke, Rd
Add Remove 3) Change	PISN I OFHINDA SRA	33003 Inson 4904 Pembroke Rd
Add Remove		LUCS+ Park FL 33003
4) Change		
Add		
5) Change		
Add		
6) Change		
Add		
Remove		

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
Remove Alan E. Robinson, Sr. as President
and Director
Remove Melvin 1 Frazier Os Vine Dresident
Am Director
Change Loshundra D. Rubinson to loshundra
S Riphinson and President Transvier
Secretary and Director
Citicing was priced
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)

The date of each amendment(s) adoption: date this document was signed.		, if other than the
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendi	ment file date)
Note: If the date inserted in this block does document's effective date on the Department		g requirements, this date will not be listed as the
Adoption of Amendment(s)	CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders was/were sufficient for		ast for the amendment(s)
☐ The amendment(s) was/were approved by must be separately provided for each voti		
"The number of votes cast for the an	nendment(s) was/were sufficient for appr	roval
by		"·
	voting group)	
The amendment(s) was/were adopted by the action was not required.	he board of directors without shareholder	r action and shareholder
The amendment(s) was/were adopted by the action was not required.	he incorporators without shareholder acti	on and shareholder
Dated 09/03/	2016	
Signature 1000	undra & KOL	inson
	resident or other officer — if directors or on accorporator — if in the hands of a receiver	
	ary by that fiduciary)	, rustee, or other court
$\bigcup_{i \in I} Q_i$	shundra S. Ri	Dbinson
	(Typed or printed name of person sign	ing)
\$500	Orptonia Dirpi	400

(Title of person signing)