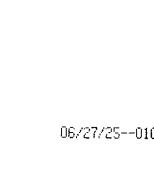
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## **COVER LETTER**

TO: Amendment Section

Division of Corporations BabyTuff Inc NAME OF CORPORATION: N25000001950 DOCUMENT NUMBER: \_ The enclosed Articles of Amendment and fee are submitted for filling. Please return all correspondence concerning this matter to the following: Banessa Alvarez (Name of Contact Person) Swyft Filings (Firm/Company) 1814 N Memorial Way (Address) Houston, TX 77007 (City/ State and Zip Code) filings@swyftfilings.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: 777-0450 Banessa Alvarez (Daytime Telephone Number) (Name of Contact Person) (Area Code) 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 (Additional copy is enclosed) (Additional Copy is Enclosed) Mailing Address Street Address Amendment Section Amendment Section Division of Corporations **Division of Corporations** The Centre of Tallahassee P.O. Box 6327

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

Baby Luff Inc	, - <u>-                                 </u>	2
(Name of Corporation as currently filed with the Florida Dept. of State)		
N25000001950	,	
(Document Number of Corporation (if known)		Ġ
Pursuant to the provisions of section 617.1006. Florida Statutes, this <i>Florida Not For Profit Corpora</i> amendment(s) to its Articles of Incorporation:	ation adopts the	following
A. If amending name, enter the new name of the corporation:		
		The new
name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreve "Company" or "Co." may not be used in the name.	iation "Corp." o	r "Inc."
Company or the many state of the state of th		
B. Enter new principal office address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
<del></del>		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
	<u>.</u>	
D. If amending the registered agent and/or registered office address in Florida, enter the nam	e of the	
new registered agent and/or the new registered office address:	e or the	
None of New Projection I decorate		
Name of New Registered Agent:		
(Florida street address		
New Registered Office Address:	,	
	Florida	
${C(ty)}$	(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.	
t nervey accept the approximent we regime to a agent. I am juminar thin and accept the oringations.	V V	
Signature of New Registered Agent, if ch	nanging	-

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 X Remove X Add	<u>PT</u> <u>V</u> § <u>V</u>	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) X Change	PD	DIANE MARQUEZ	2096 SW 27th Terr
Add	<del></del> _		Fort Lauderdale, FL 33312
Remove			
2) Change	DS_	LINA   SERRANO	2096 SW 27th Terr
X Add			Fort Lauderdale, FL 33312
Remove 3) Change Add	DIR	ELIJAH GHE	2096 SW 27th Terr Fort Lauderdale, FL 33312
X Remove 4) Change <u>DIF</u> Add	₹	LEAH PITRE	2096 SW 27th Terr Fort Lauderdale, FL 33312
X Remov  5) Change <u>DT</u> X Add		SHEILA M GONZALEZ	2096 SW 27th Terr Fort Lauderdale, FL 33312
Remove  6) Change Add  Remove			

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)					
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	6/10/2025	
The date of each amendment(s) add	option:	, if other than the date
this document was signed.		
Effective date if applicable:	(no more than 90 days after amendment file date)	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bloc document's effective date on the Dep	k does not meet the applicable statutory filing requirements, this date will n artiment of State's records.	ot be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were add was/were sufficient for approval	opted by the members and the number of votes east for the amendment(s)	
There are no members or member adopted by the board of directors	ers entitled to vote on the amendment(s). The amendment(s) was/were s.	
Dated ()	oks.	,
Signature	<u> </u>	
	nan or vice chairman of the board, president or other officer-if directors	
	ted, by an incorporator - if in the hands of a receiver, trustee, or	
other court appoint	ed fiduciary by that fiduciary)	
Diane Ma	arquez	
***		
	(Typed or printed name of person signing)	
Presiden	t	
<del></del>	(Title of person signing)	