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(Requestor's Name)
(Address)
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(Business Entity Name)
(Document Number)
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COVER LETTER

TO:	Amendment Section				
	Division of Corporations				

NAME OF CORPORATION	: <u>Fashion Busines</u>	S ASSOCIATION OF	AMERICA, INC.		
DOCUMENT NUMBER:1	399000005781				
		ued for filing			
The enclosed Articles of Amer					
Please return all correspondent	te concerning this matter	to the following:			
		Betty C. Ferrero Name of Contact Perso	,,,		
	(Name of Contact Perso	1)		
					
		(Firm/ Company)			
_		<u>9378 NW 8TH CIRCLI</u>	<u>. </u>		
		(Address)			
		Plantation, Florida 333	24		
		City/ State and Zip Coo	le)		
E-	mail address: (to be used	for future annual report	notification)		
For further information conce	mine this matter, please	call:			
TO Turner mioriment	•				
	Betty C. Ferrero	21	954-476-5761		
	Name of Contact Person,		rea Code) (Daytime Telephone Number)		
,					
Enclosed is a check for the fo	Howing amount made pa	yable to the Florida Dep	partment of Stafe:		
Mark to a reverse of the control of	□\$43.75 Filing Fee &	□\$43.25 Filing Fee &	☐SS2.50 Filling Fee		
■\$35 Filling Fee	Certificate of Status	Certified Copy	Certificate of Status		
	Certificate of Status	(Additional copy is	Certified Copy		
		enclosed)	(Additional Copy is		
		•	Enclosed)		
		Strae	t Address		
Mailing Address		Amendment Section			

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

Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



July 6, 2018

BETTY C. FERRERO 9378 NW 8TH CIRCLE PLANTATION, FL 33324

SUBJECT: FASHION BUSINESS ASSOCIATION OF AMERICA, INC.

Ref. Number: N99000005781

We have received your document for FASHION BUSINESS ASSOCIATION OF AMERICA, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The current name of the entity is as referenced above. Please correct your document accordingly.

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.

Letter Number: 118A00014012

Irene Albritton Regulatory Specialist II

www.sunbiz.org

18 10:34a	S. Racicot		561318868	р.3
		Articles of Amendment		ASTONIA TO THE PARTY OF THE PAR
		to		450 U
		Articles of Incorporation		
		σf		
	FASHION BL	ISINESS ASSOCIATION OF AMERICA, INC	**	
	(Name of Corps	pration as currently filed with the Florida De	pt, of State)	200
	·	N99000005781		
		(Document Number of Corporation (if known)		
mendment(s) to	its Articles of Incorporatio		i <i>t Corporution</i> adopts	: the following
. If amending	name, enter the new nam	e of the carporation:		
			. II to to the a factor	The new
ame must be di Company" or	sunguishable and contain t 'Co." may not be used in t	he word "corporation" or "incorporated" or t he name.	he appreviation. Cor	p. or the.
3. <u>Enter new p</u> Principal office	rincipal office address, if address <u>MUST BE A STI</u>	applicable: REET_ADDRESS)		
C. Enter new (Mailing ad	mailing address, if applica address <u>MAY BE A POST O</u>	nble: FFICE BON		
l). If amending new registe	the registered agent and red agent and/or the new Name of New Registered	/or registered office address in Florida, enteregistered office address: Agent	r the name of the	
				
	u - n		stree: audress)	
	New Registered Office.	<u>quereas</u> .		
			, Florida /Zip Coa	
		(City)	121 <u>0</u> C 09	<i>.,</i>
New Registers I hereby accept	d Agent's Signature, if ch the appointment as registe	anging Registered Agent: red agent. I am familiar with and accept the t	obligations of the pos	ition
		Signature of New Registered	Acent Tehonoino	
		Signature of New Registered	agent, genauging	

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, 2nd 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 PSF 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 Doc, PT as a Change, Mike Janes, V as Remove, and Sally Smith, SV as an Add.

Example: X_Change X_Remove X_Add	PT John Y Mike SV Sally	<u>Doe</u> <u>Jones</u> <u>Smith</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
	D	Steve Z Levy	2875 NE 191 ST. #601
1) Change	_ <u>D</u>		Aventura, Fl. 33180
Add			
2) Change			
Add Remove			
3) Change			
Add Remove			
4) Change			
Add Remove			
5) Change			
Add			
Remove			
6) Change Add			
Remove		Page 2 of 4	

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	(attach additional sheets, if necessary),	The specyres					
							
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Page 3 of 4

The date of each amendment(s) adoption: <u>June 20, 2018</u>	, if other than the
date this document was signed.	
Effective date <u>if applicable</u> : (no more than 90 days after amendment file date)	
·	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not document's effective date on the Department of State's records.	or be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.	
There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.	
Dated July 18, 2018	
Signature Sandra K. Rocicat	
(By the chairman or vice chairman of the board, president or other officer-if directors	
have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
Sandra K. Racicot	
(Typed or printed name of person signing)	
Director	
(Tida of pareau signing)	