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JUL 29 2014 T. CARTER

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: VICTORIA'S DOCUMENT NUMBER: P0000050	S ANTIQUE WARI	EHOUSE, INC.			
The enclosed Articles of Amendment and fee are su	ibmitted for filing.				
Please return all correspondence concerning this ma	tter to the following:				
M. Meredith Ki	rste				
	Name of Contact Person	1			
M. Meredith Ki	rste, P.A.				
	Firm/ Company				
7928 U.S. High	nway 441, Sui	te 3			
	Address				
Leesburg, FL 3	34788-8206				
	City/ State and Zip Cod	e			
reception is +803 a earth link. net E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
M. Meredith Kirste	at (352	, 326-3455			
Name of Contact Person		de & 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 & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			
Mailing Address	Street	Address			
Amendment Section	Amendment Section				

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

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

Articles of Amendment to Articles of Incorporation



VICTORIA'S ANTIQUE WAREHOUSE, INC.

14 JUL 10 Pil 2: 25

(Name of Corporation as currently filed with the Florida Dept. of State) P00000050064 (Document Number of Corporation (if known) 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: Not Applicable 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." Not Applicable B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Not Applicable 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	Not Applicable		
	(Florida street address)		
New Registered Office Address:	(City)	, Florida	(Zip Code)

New Registered Agent's Signature, if changing Registered Agent: N/A

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: 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)	Title	N	lame	Address	
1) Change	V	_	Scott Edward Murphy	113 North 7th Street	
Add				Leesburg, FL 34748	
Remove					
2) Change	· · · · · ·				
Add					
Remove					
3) Change					
Add					
Remove					
4) Change		····			
Add					
Remove					
5) Change					
Add					
Remove					
O Character					
6) Change		 _			
Add					
Remove					

	heets, if necessary).	(Be specific)		
ot Applicable				·
 				
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	plementing the ame	<u>:ndment if not conta</u>	ined in the amendn	<u>ient itself:</u>
provisions for imp	I.I I' M//45			
provisions for imp	ble, indicate N/A)			
provisions for imp	ble, indicate N/A)			
provisions for imp	ble, indicate N/A)			
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provisions for imp	ble, indicate N/A)			
If an amendment p provisions for imp (if not applicate of Applicable	ble, indicate N/A)			
provisions for imp	ble, indicate N/A)			
provisions for imp	ble, indicate N/A)			

The date of each amendment(s) adoption: date this document was signed.	_, if other than the
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"	
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	
Signature Pletaria Surph	_
(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)	
Victoria L. Murphy	
(Typed or printed name of person signing)	_
PSTD/ President, Secretary, Treasurer, Director	_
(Title of person signing)	_