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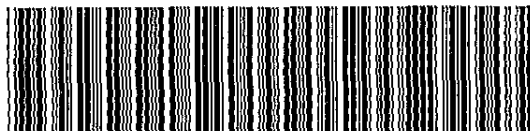
(Business Entity Name)

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05 OCT 18 AM 10:10:05 OCT 19 PM 2:38  
STATE SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

*AJR*  
*10/19/05*

**LAZARUS  
CORPORATE FILING SERVICE**

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**CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):**

1. OLIVIA FASHIONS, CORP.  
(Corporation Name) (Document #)

2. \_\_\_\_\_  
(Corporation Name) (Document #)

3. \_\_\_\_\_  
(Corporation Name) (Document #)

4. \_\_\_\_\_  
(Corporation Name) (Document #)

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**NEW FILINGS**

- ☒ Profit  
☐ Not for Profit  
☐ Limited Liability  
☐ Domestication  
☐ Other

**AMENDMENTS**

- ☒ Amendment  
☐ Resignation of R.A., Officer/Director  
☐ Change of Registered Agent  
☐ Dissolution/Withdrawal  
☐ Merger

**OTHER FILINGS**

- ☐ Annual Report  
☐ Fictitious Name

**REGISTRATION/QUALIFICATION**

- ☐ Foreign  
☐ Limited Partnership  
☐ Reinstatement  
☐ Trademark  
☐ Other

**Examiner's Initials**



FLORIDA DEPARTMENT OF STATE  
Glenda E. Hood  
Secretary of State

October 18, 2005

LAZARUS

TALLAHASSEE, FL

SUBJECT: OLIVIA FASHIONS CORPORATION  
Ref. Number: P02000037422

RECEIVED  
05 OCT 19 AM 11:01  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

We have received your document for OLIVIA FASHIONS CORPORATION and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(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) 245-6903.

Cheryl Coulliette  
Document Specialist

Letter Number: 905A00063340

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF INCORPORATION  
OF**

**FILED**  
**05 OCT 19 PM 2:38**  
**SECRETARY OF STATE**  
**TALLAHASSEE, FLORIDA**

*OLIVIA FASHIONS CORPORATION*

*Pursuant to the provisions of sections 607.1006, Florida Statutes, this Florida profit corporation adopts the following articles of amendment to its articles of incorporation:*

**FIRST:** Amendment(s) adopted: *(indicate article number(s) being amended, added deleted)*

**ARTICLE .VI**  
**BOARD OF DIRECTORS**

The officers will be

<b>STROCOVSKY SILVIA M.</b>	<b>President</b>	<b>Add</b>
<b>DE PRECKEL, ESTHER TEJEDOR</b>	<b>President</b>	<b>Delete</b>
<b>CATALINA FRANZOSI</b>	<b>VicePresident</b>	<b>Delete</b>
<b>STROCOVSKY SILVIA M.</b>	<b>Secretary</b>	<b>Delete</b>

9751 E BAY HARBOR DR. SUITE 603  
BAY HARBOR ISLANDS, FL. 33154

**SECOND:** 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, are as follows.

**THIRD:** The date of each amendment's adoption: **10/17/2005**

**FOURTH: Adoption of Amendment(s) (CHECK ONE)**

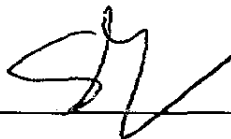
- ☒ The amendment(s) was/were approved by the shareholders. The number of votes cast for the amendment(s) was/were sufficient for approval
- ☐ The amendment(s) was/were approved by the shareholders through voting groups. *The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):*

The number of votes cast for the amendment(s) was/were sufficient for approval by .....

- ☐ 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.

Signed this      day of 17 OCTOBER 2005

Signature \_\_\_\_\_



OR

(By a director if adopted by the directors)

OR

(By an incorporator if adopted by the incorporators)

**STROCOVSKY, SILVIA M.**

Name

**SECRETARY**

Title