PO20000 43231

	(Requestor's Name)
	(Address)
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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORA	ATION: RELIK APPAREL	. INC	
DOCUMENT NUMBI	P0200043231		
The enclosed Articles o	f Amendment and fee are su	bmitted for filing.	
Please return all corresp	ondence concerning this ma	tter to the following:	
1	DANILO N OCHOA		
_		Name of Contact Person	7
-		Firm/ Company	
_	4385 22ND STREET NE		
7	NAPLES FL 34120	Address	
_		City/ State and Zip Code	e
yeistyo	ochoa@gmail.com	,	
<u> </u>	E-mail address: (to be us	sed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
DANILO N OCHOA		786	586-9911
Name of	f Contact Person		de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amer Divis P.O.	ing Address address address ion of Corporations Box 6327 hassee, FL 32314	Ameno Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301

Articles of Amendment to Articles of Incorporation of

RELIK APPAREL INC

(<u>Name o</u> P02000043231	f Corporation as current	tly filed with the Florida Dept. of State)	
102000043231	(Document Number of	of Corporation (if known)	
Pursuant to the provisions of section 607. its Articles of Incorporation:		s Florida Profit Corporation adopts the follow	ring amendment(s) to
A. If amending name, enter the new na	me of the corporation:		The man
	ation "Corp," "Inc," or	on," "company," or "incorporated" or the "Co". A professional corporation name must "P.A."	
B. Enter new principal office address, (Principal office address MUST BE A ST		N/A	
C. Enter new mailing address, if applia (Mailing address MAY BE A POST Control of the Indian Action of the Indian Action of the New Tegistered agent and Indian of the New Teg	OFFICE BOX) d/or registered office add		2010: A. 2. 15 PA 5: 1
	N/A	<u>s:</u>	. 6
Name of New Registered Agent			
	N/A		
New Registered Office Address:	(Florida st N/A	reet address) . Florida	
		(Citv) (Zi	p Code)

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	<u>PT</u>	John Do	<u>oe</u>	. /	
X Remove	$\underline{\mathbf{v}}$	Mike Jo	ones	NA	
X Add	<u>sv</u>	Sally Sr	mith		
Type of Action (Check One)	<u>Title</u>		Name		<u>Addres</u> s
1) Change		_			
Add					
Remove					
2) Change		_			
Add					
Remove					
3) Change		_	·····		
Add					
Remove					
4) Change		_			
Add					
Remove					
5) Change					
Add					
Remove					
6) Change					
Add				· 	
Remove					

(Attach additional sheets, if necessary).	cles, enter change(s) here: (Be specific)
N/A	
F. If an amendment provides for an exch	ange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	iditent it not contained in the amendment usen.
N/A	

The date of each amendment(s), a date this document was signed.	doption:, if other than the
Effective date if applicable:	
	(no more than 90 days after amendment file date)
Note: If the date inserted in this document's effective date on the De	block does not meet the applicable statutory filing requirements, this date will not be listed as the epartment of State's records.
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
☐ The amendment(s) was/were adby the shareholders was/were so	opted by the shareholders. The number of votes cast for the amendment(s) afficient for approval.
☐ The amendment(s) was/were ap must be separately provided for	proved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):
	for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
☐ The amendment(s) was/were adaction was not required.	opted by the board of directors without shareholder action and shareholder
action was not required.	opted by the incorporators without shareholder action and shareholder
03/12/201 Dated Signature	MATTER AND
(By a c	irector president of other officer = indirectors or officers have not been
appoin	d. by an incorporator — If in the hands of a receiver, trustee, or other court ted fiduciary by that fiduciary)
	DANILO N OCHOA
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)