# 120000/44/83

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MAY 27 2014 C. CARROTHERS

### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION:	YULYANNY FASHION CORPORATION				
DOCUMENT NUMBER:	P02000066483				
The enclosed Articles of Amendme	at and fee are submitted for filing.				
Please return all correspondence co	accerning this matter to the following:				
	JUANA OCONOR				
<del> </del>	Name of Contact Person				
YU	LYANNY FASHION CORPORATION				
<del></del>	Firm/ Company				
	530 W 29 ST				
	Address				
	MIAMI, FL 33012				
	City/ State and Zip Code				
	JORAUCO2@AOL.COM				
E-mail a	ddress: (to be used for future annual report notification)				
For further information concerning	his matter, please call:				
JUANA OCON	ORat (_786) 587-5347				
Name of Contact Pe					
Enclosed is a check for the following	g amount made payable to the Florida Department of State:				
	S Filing Fee & S43.75 Filing Fee & S2.50 Filing Fee Certified Copy (Additional copy is enclosed)  S Filing Fee & S43.75 Filing Fee & Certificate of Status (Certified Copy (Additional Copy is enclosed)				
Mailing Address Amendment Section Division of Corpo					
P.O. Box 6327	Clifton Building				
Tallahassee, FL 3	2314 2661 Executive Center Circle Tallahassee, FL 32301				

## Articles of Amendment to Articles of Incorporation

# YULYANNY FASHION CORPORATION

# (Name of Corporation as currently filed with the Florida Dept. of State)

P02000066483	Hen Dept. of State
(Document Number of Corporation (if k	(nown) 7015
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>FI</i> its Articles of Incorporation:  A. If amending name, enter the new name of the corporation:	TARY OF AT
name must be distinguishable and contain the word "corporation," "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Coword "chartered," "professional association," or the abbreviation "P.	o". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
C. <u>Enter new mailing address, if applicable:</u> (Mailing address <u>MAY BE A POST OFFICE BOX</u> )	
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:	ss in Florida, enter the name of the
Name of New Registered Agent	
(Florida street	t address)
New Registered Office Address: (City)	, Florida (Zip Code)
.  New Registered Agent's Signature, if changing Registered Agent:  I hereby accept the appointment as registered agent. I am familiar wit	th 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	$\underline{\mathbf{v}}$	Mike Jones			
X Add	<u>sv</u>	Sally Smith			
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s	
1) Change	V	_	ANNELIESSE OCONOR	1776 NW 32 ST	
✓ Add				MIAMI, FL 33142	
Remove					
2) Change		<del></del>			
Add					
Remove					
3) Change		_			
Add					
Remove					
4) Change		_			
Add					
Remove					
5) Change		_			
Add					
Remove					
6) Change		<del></del>			
Add					
Remove					

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
<del></del>	
	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	

The date of each amendment(s) adoption: U5/16/2015 date this document was signed.	, if other than the
· ·	
Effective date <u>if applicable</u> :  (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"  (voting group)	
(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.	
Dated05/16/2015	
Dated 05/16/2015 Signature Juna L. Deoner D	
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)	
JUANA OCONOR	
(Typed or printed name of person signing)	<del></del>
PRESIDENT	
(Title of person signing)	<del></del>