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TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Chocolate Fashion	n. Inc.			
DOCUMENT NUMBER: P02000122542				
The enclosed Articles of Amendment and fee are st	abmitted for filing.			
Please return all correspondence concerning this ma	atter to the following:			
Jeffrey E. Lehrman, Esq.				
	Name of Contact Perso	on		
Yagoda + Lehrman Law Firr	n LLC			
	Firm/ Company			
232 Andalusia Avenue, Suite	201			
	Address			
Coral Gables, FL 33134				
	City/ State and Zip Co	de		
jel@yagodalaw.com				
	sed for future annual repor	t notification)		
For further information concerning this matter, pleas	se call:			
Jeffrey E. Lehrman, Esq.	at (460-4447		
Name of Contact Person	Area C	ode & Daytime Telephone Number		
Enclosed is a check for the following amount made	payable to the Florida Dep	nartment 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)		
Mailing Address	· · · · · · · · · · · · · · · · · · ·	<u>t Address</u>		
Amendment Section		Amendment Section		
Division of Corporations P.O. Box 6327	Division of Corporations			
P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circl				

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Chocolate Fashion, Inc.	
(Name of Corporation as currer	ntly filed with the Florida Dept. of State)
P02000122542	
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, thi its Articles of Incorporation:	is Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
N/A	The new
name must be distinguishable and contain the word "corporat "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc," or word "chartered," "professional association," or the abbreviation	ion," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	N/A
(Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable:	9 7
(Mailing address MAY BE A POST OFFICE BOX)	N/A S S
	- 12 N
D. If amending the registered agent and/or registered office ad new registered agent and/or the new registered office addre	
Vagoda & Lehrman Law	Firm LLC ATTN: Jeffrey E. Lehrman, Esq.
Name of New Registerea Agent	
232 Andalusia Avenue, S	
(Florida s	street address)
New Registered Office Address: Coral Games	, Florida 33134
New Registered Agent's Signature, if changing Registered Agen	(City) (Zip Code)
I hereby accept the appointment as registered agent. It am familian	r with and accept the obligations of the position.
	I I A A A A L
#XAA	[//////
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)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	P/D	Geroges Berger	248 Andalusia Avenue
Add			Coral Gables, FL 33134
X Remove			
2) X Change	P/S/D	Perseverania Berger	248 Andalusia Avenue
Add			Coral Gables, Fl. 33134
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Arti (Attach additional sheets, if necessary).	(Be specific)
N/A	
E. If an amandment provides for an each	ange replacification or appeallation of issued shape.
provisions for implementing the amer	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
N/A	

	N/A	
The date of each amendment(s) a	doption:	, if other than the
date this document was signed.		
N/A Effective date <u>if applicable</u> :		
meent date <u>n appreaint</u> .	(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 witepartment of State's records.	ll not be listed as the
Adoption of Amendment(s)	(<u>CHECK QNE</u>)	
The amendment(s) was/were ad- by the shareholders was/were st	opted by the shareholders. The number of votes cast for the amendment(s) ifflicient for approval.	
	proved by the shareholders through voting groups. The following statement 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 addaction was not required.	opted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were ad- action was not required.	opted by the incorporators without shareholder action and shareholder	
Dated	29/25/17	
selecte	lirector, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other court ited fiduciary by that fiduciary)	
	Perseverania Berger	
	(Typed or printed name of person signing)	
	Director	
	(Title of person signing)	