

P04 000017571

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

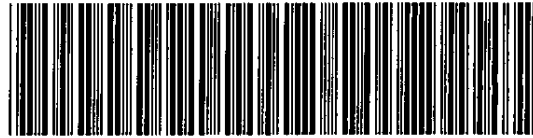
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Special Instructions to Filing Officer:

Corrected Name of
Corp by phone call
TR 7/20

Office Use Only



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06/28/06--01014--006 **52.50

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FILED
2006 JUL 19 AM 8:29
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. Roberts JUL 20 2006



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 6, 2006

KATHRYN DEL CALVO
FASHION SURPLUS IMPORTERS, INC.
3309 SW 13TH AVENUE
FORT LAUDERDALE, FL 33315

SUBJECT: FASHION SURPLUS IMPORTERS, INC.
Ref. Number: P04000017571

We have received your document for FASHION SURPLUS IMPORTERS, INC. and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

The existing entity name is FSI OF FLORIDA, LLC. See attached computer print out.

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).245-6892.

Tina Roberts
Document Specialist

Letter Number: 606A00043772

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: FASHION SURPLUS IMPORTERS, INC.

DOCUMENT NUMBER: PO4000017571

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

KATHRYN DEL CALVO

(Name of Contact Person)

FASHION SURPLUS IMPORTERS, INC.

(Firm/ Company)

3309 SW 13TH AVENUE

(Address)

FORT LAUDERDALE, FLORIDA 33315

(City/ State and Zip Code)

For further information concerning this matter, please call:

KATHRYN DEL CALVO

(Name of Contact Person)

at (954) 467-5077

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☐ \$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

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

Street Address

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

Articles of Amendment
to
Articles of Incorporation
of

FILED
2006 JUL 19 AM 8:29
SECRETARY OF STATE
TALLAHASSEE, FLORIDA.

FASHION SURPLUS IMPORTERS, INC.

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

PO4000017571

(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:

NEW CORPORATE NAME (if changing):

F.S.I - FORT LAUDERDALE, .INC.

(Must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.")

(A professional corporation must contain the word "chartered", "professional association," or the abbreviation "P.A.")

AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: **(BE SPECIFIC)**

N/A

(Attach additional pages if necessary)

If an amendment provides for exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)

N/A

(continued)

The date of each amendment(s) adoption: 07/01/06

Effective date if applicable: 07/01/06
(no more than 90 days after amendment file date)

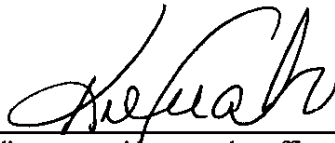
Adoption of Amendment(s) **(CHECK ONE)**

- ☐ The amendment(s) was/were approved 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)

- ☒ 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.

Signature



(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)

KATHRYN DEL CALVO

(Typed or printed name of person signing)

DIRECTOR

(Title of person signing)

FILING FEE: \$35