## P05000040057

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JIM S S PERMS



TO: Amendment Section Division of Corporations

NAME OF CORPOR	AATION: SPECIAL OCCAS	SIONS WHOLESALE, INC	
DOCUMENT NUME			
	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	MITCHELL S ROSENTHA	L	
		Name of Contact Person	1
	SPECIAL OCCASIONS WE	IOLESALE, INC.	
		Firm/ Company	
	141 WEST 36TH STREET -	17TH FLOOR	
		Address	
	NEW YORK, NY 10018		
		City/ State and Zip Code	e
MITO	H@EMSGROUPLTD.COM		
	E-mail address: (to be us	sed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
MITCHELL ROSEN	ΓHAL	at ( <sup>212</sup>	515-2400
Name of 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)
Ame Divi P.O.	ling Address ndment Section sion of Corporations Box 6327 shassee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section on of Corporations Building xecutive Center Circle assee, FL 32301

## **Articles of Amendment** to Articles of Incorporation



15 JUN 11 PM 3: 28 of

SPECIAL OCCASIONS WHOLESALE, INC.	
P05000040057	ion as currently filed with the Florida Dept. of State)
	nent Number of Corporation (if known)
(Social)	neit (Million of Corporation (it known)
Pursuant to the provisions of section 607.1006, Floridates Articles of Incorporation:	a Statutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the co	orporation:
PRINCESS COLLECTION CORP	The new
	rd "corporation," "company," or "incorporated" or the abbreviation o," "Inc," or "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable	e:
(Principal office address <u>MUST BE A STREET ADD</u>	DRESS )
C. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BO	<u> </u>
D. If amending the registered agent and/or register	red office address in Florida, enter the name of the
new registered agent and/or the new registered	office address:
Name of New Registered Agent	
	(Florida street address)
V . D	,
New Registered Office Address:	(City), Florida(Zip Code)
	(Elp Couc)
New Registered Agent's Signature, if changing Reg	zistered Agent:
	I am familiar with and accept the obligations of the position.
Signo	ature 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 Do	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	<u>ones</u>	
X Add	<u>sv</u>	Sally St	<u>nith</u>	
Type of Action (Check One)	Title		Name	Address
1) Change		<del></del>		
Add				
Remove				
2) Change		_		
Add				
Remove				
3 ) Change		_		
Add				
Remove				
4) Change				
Add			<del> </del>	
Remove				
5) Change		_		
Add				
Remove				
6) Change				
Add	-	_		
Remove				

f amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)		
f an amendment provides for an exch provisions for implementing the ame	nange, reclassification, or on the second industries in the second industries industries industries in the second industries industries industries in the second industries indust	cancellation of issued shares.	
(if not applicable, indicate N/A)			

JUNE 1	0, 2015
The date of each amendment(s) adoption:	if other than the
date this document was signed.	कार्यक्षेत्रे के अने देवता का का भी
JUNE 10, 2015  Effective date <u>if applicable</u> :	<i>y</i> , , ,
(no	more than 90 days after amendment file date) 15 JUN 11 PH 3: 28
Note: If the date inserted in this block does not me document's effective date on the Department of State	eet the applicable statutory filing requirements, this date will not be listed as the 's records.
Adoption of Amendment(s) (CHECK	(ONE)
The amendment(s) was/were adopted by the share by the shareholders was/were sufficient for approx	holders. The number of votes cast for the amendment(s) val.
	reholders through voting groups. The following statement p entitled to vote separately on the amendment(s):
"The number of votes cast for the amendment	nt(s) was/were sufficient for approval
by(voting g	,,, -
(voting g	roup)
The amendment(s) was/were adopted by the board action was not required.	d of directors without shareholder action and shareholder
The amendment(s) was/were adopted by the incor action was not required.	porators without shareholder action and shareholder
JUNE 10, 2015 Dated	
Signature	
	or other officer – if directors or officers have not been
selected, by an incorpora appointed fiduciary by the	ator – if in the hands of a receiver, trustee, or other court nat fiduciary)
CYNTHIA B GO	OLDSTEIN
(Type	ed or printed name of person signing)
PRESIDENT	
	(Title of person signing)