

(Re	equestor's Name)	
· (Ac	ldress)	
(Āc	ddress)	
(Ci	ty/State/Zip/Phone	<i>; #</i>)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nam	ne)
(De	ocument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
		i
		,

Office Use Only



500250309385

08/05/13---01017---020 **35.180

, AUG = 7. 2013

R. WHITE



COVER LETTER

TO: Amendment Section

Division of Corporations NAME OF CORPORATION: VOGUE MAVEN, INC DOCUMENT NUMBER: P05000092220 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: CATHERINE CAPOVILLA Name of Contact Person VOGUE MAVEN, INC. Firm/ Company 101 PLAZA REAL S., UNIT 516 BOCA RATON, FL 33432 City/ State and Zip Code CATHERINECAPOVILLA@GMAIL.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: CATHERINE CAPOVILLA Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: □\$52.50 Filing Fee ■ \$35 Filing Fee **□\$43.75** Filing Fee & **□\$43.75** Filing Fee & Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Street Address **Mailing Address** Amendment Section Amendment Section Division of Corporations Division of Corporations Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, FL 32314

Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation of

FILEB

AUG -5 AM 10:55

VOGUE MAVEN, INC

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

SEGREMARY OF STATES
TALEARASSEEFF LURIDA

P05000092220		·
	(Document Number of Corporation (if known)	

ent(s) to

If amending name, enter the new name of the corp	oration:
OUNTLESS DREAMS, INC.	
	"corporation," "company," or "incorporated" or the "Inc," or "Co". A professional corporation name mubreviation "P.A."
Enter new principal office address, if applicable:	101 PLAZA REAL S.
incipal office address <u>MUST BE A STREET ADDR</u>	UNIT 516
	BOCA RATON, FL 3343
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	SAME AS ABOVE
	SAME AS ABOVE
	SAME AS ABOVE
	SAME AS ABOVE
(Mailing address MAY BE A POST OFFICE BOX) If amending the registered agent and/or registered	office address in Florida, enter the name of the
(Mailing address MAY BE A POST OFFICE BOX) If amending the registered agent and/or registered	office address in Florida, enter the name of the
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	office address in Florida, enter the name of the
(Mailing address MAY BE A POST OFFICE BOX) If amending the registered agent and/or registered new registered agent and/or the new registered of	office address in Florida, enter the name of the
(Mailing address MAY BE A POST OFFICE BOX) If amending the registered agent and/or registered new registered agent and/or the new registered of	office address in Florida, enter the name of the
(Mailing address MAY BE A POST OFFICE BOX) If amending the registered agent and/or registered new registered of	office address in Florida, enter the name of the fice address:

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.

<u>X</u> Change	<u>PT</u>	John Do	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	<u>nes</u>	
X Add	<u>sv</u>	Sally Sr	nith	
Type of Action (Check One)	Title		Name	Address
1) Change		_		
Add				
Remove				
2) Change		_		
Add				
Remove				
3) Change				
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

The state of the s	icles, enter change(s) here: (Be specific)
-	
	
	·
f an amendment provides for an exch	lange, reclassification, or cancellation of issued shares,
f an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued snares, endment if not contained in the amendment itself:
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
provisions for implementing the ame	nange, reclassification, or cancellation of issued snares, endment if not contained in the amendment itself:
provisions for implementing the ame	nange, reclassification, or cancellation of issued snares, endment if not contained in the amendment itself:
f an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued snares, endment if not contained in the amendment itself:

The date of each amendment(s) adoptate this document was signed.	JULY 31, 2013	, if other than the
Effective date if applicable:		
<u></u>	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were adopt by the shareholders was/were suffi	ed by the shareholders. The number of votes cast for the amendment(s) cient for approval.	
	wed by the shareholders through voting groups. The following statement ach voting group entitled to vote separately on the amendment(s):	
"The number of votes cast fo	r the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were adopt action was not required.	ed by the board of directors without shareholder action and shareholder	
The amendment(s) was/were adopt action was not required.	ed by the incorporators without shareholder action and shareholder	
Dated_JULY	31, 2013	
Signature		.
selected,	ector, president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other court induciary by that fiduciary)	
	CATHERINE CAPOVILLA	
_	(Typed or printed name of person signing)	_
F	PRESIDENT	

(Title of person signing)