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To:

Division of Corporations

Fax Number : (850) 617-6380

From:

Account Name : CRICHTON MULLINGS & ASSOCIATES PA

Account Number : 120070000038

: (954)862-2250

Fax Number

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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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COR AMND/RESTATE/CORRECT OR O/D RESIGN; SCHLOSSY URBAN DESIGN INC.

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7

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPOR	ATION: Schlossy Ur	ban Design Inc.	
DOCUMENT NUMB	er. P06000011932	2	
	of Amendment and fee are sub		
Please return all corresp	pondence concerning this matt	er to the following:	
	Leary N	Mullings	
•		Name of Contact Person	
	CrichtonM	ullings	
•		Firm/ Company	
	3350 SW	148th Ave.	
		Address	
	Miramar, F	L 33027	•
		City/ State and Zip Code	
	dstimpson@e	crichtonmullings	.com
		ed for future annual report	
	,	•	
For further information	n concerning this matter, pleas	e call:	
Dawn Stim	pson	_{at (} 954	862 2250
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	σ the following amount made η	payable to the Florida Depa	ariment 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			Address

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

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

Articles of Amendment to Articles of Incorporation of

Schlossy Urban Design Inc.		
(Name of Corporation as currently filed with the Florida Dept. of State)		
P06000011932		
(Document Number of Corporation (if known)		
Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the folloits Articles of Incorporation:	wing amen	dment(s) t
A. If amending name, enter the new name of the corporation:		
Spicey Vibez Inc.	The	manu.
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the "Corp," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name m word "chartered," "professional association," or the abbreviation "P.A."	ue abbrevia nust contain	ition 1 the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		
		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
		
	<u> 75</u>	
	7 5	-41
D. If amending the registered agent and/or registered office address in Florida, enter the name of the	100	mann, "
new registered agent and/or the new registered office address:	# W	. 40304.
Name of New Registered Agant		_
(Florida street address)		·
New Registered Office Address:, Florida		
(City) (Zip Code	i)	
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the positions of the posit	ion.	

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and adilless 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	⊻	Mike Jones	,
_X Add	<u>sv</u>	Sally Smith	
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			

tach additional sheets, if necessary)). (Be specific)
If an amandment provider for an a	exchange, reclassification, or cancellation of issued shares.
provisions for implementing the 2	mendment if not contained in the amendment itself:
(if not applicable, indicate N/A))

The date of each amendmen	t(s) adoption: 10.5.12
Effective date <u>if applicable:</u>	10.5.12
Puective nate <u>n abbitranie</u> :	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
☐ The amendment(s) was/we by the shareholders was/w	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.
	te approved by the shareholders through voting groups. The following statement ed for each voting group entitled to vote separately on the amendment(s):
"The number of vote	s cast for the amendment(s) was/were sufficient for approval
by	(voting group)
action was not required.	ere adopted by the board of directors without shareholder action and shareholder ere adopted by the incorporators without shareholder action and shareholder
Signature	0.5.12 Vi
5	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)
	Nicole Lee
	(Typed or printed name of person signing)
	President
	(Title of person signing)