# P06000018144

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(Do	cument Number)			
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TALLAHASSEE, FLORIDA

Amund Name Chs (a 8/15/10

#### **COVER LETTER**

TO: Amendment Section

Division of Corporations

•	•
	a Boutique, Inc.
DOCUMENT NUMBER: POGO	200078144
The enclosed Articles of Amendment and fee are su	bmitted for filing.
Please return all correspondence concerning this ma	tter to the following:
Nicole E	of Contact Person
Cabrera E	m/Company
930 Veni	Ce Divol. #202 Address
City/S  City/S  City/S  City/S  City/S	tate and Zip Code  OSS O VOTTO II - COM  future annual report notification)
For further information concerning this matter, plea	se call:
Name of Contact Person	at (310) 902995) Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made	payable to the Florida Department of State:
\$35 Filing Fee	S43.75 Filing Fee & S52.50 Filing Fee Certified Copy (Additional copy is enclosed)  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



August 2, 2010

NICOLE ENCINOSA CABRERA BOUTIQUE, INC. 930 VENICE BLVD. #202 VENICE, CA 90291

SUBJECT: CABRERA BOUTIQUE, INC.

Ref. Number: P06000078144

We have received your document for CABRERA BOUTIQUE, INC. and your check(s) totaling \$35.00. 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 document number of the name conflict is L10000020846 - CABRERA, LLC.

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) 245-6964.

Irene Albritton
Regulatory Specialist II

SECRETARY.OF STATE

Letter Number: 210A00018506

2010 AUG 10 AM &: 01

## Articles of Amendment to Articles of Incorporation of

	Caloren	a Bow	rique, In	۱ د .	%
(Name	of Corporation as curre	ntly filed with t	he Florida Dept. (	of State)	1
	P0600	8700	144		
	(Document Numl	ber of Corporati	on (if known)		
	ions of section 607.1006 ticles of Incorporation:	, Florida Statut	es, this <i>Florida P</i>	rofit Corporation adopts the foll	owing
A. If amending name	e, enter the new name of	the corporation	<u>ı:</u>		
abbreviation "Corp.,"	guishable and contain th	he word "corp designation "C	oration," "compa orp," "Inc," or "C	my," or "Incorporated" or the Co". A professional corporation reviation "P.A."	
	oal office address, if appl ess <u>MUST BE A STREE</u> T		#309	-	
C. Enter new mailin (Mailing address M	g address, if applicable: MAY BE A POST OFFIC	CE BOX)	1234 S	ables, FL 33146 . Dixie Hwy.	
new registered ago	egistered agent and/or reent and/or reent and/or the new regis		address in Florid	•	<i>ح</i> ا
New Registered	d Office Address:	(Flori	da street address)		
	-	(City)		, Florida(Zip Code)	
	t's Signature, if changin pointment as registered ag			pt the obligations of the position.	
	Si	ionature 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) Title **Name** Address **Type of Action** ☐ Add ☐ Remove \_\_\_\_\_ 🗖 Add ☐ Remove E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific) F. If an amendment provides for an 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)

The date of each amendment(s) adoption:
(date of adoption is required)
Effective date if applicable: VIIIO .  (no more than 90 days after amendment file date)
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were adopted 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)
(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.
Dated (2000 8710 (Revision)
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)
Nicole Enciosa (Typed or printed name of person signing)
(1 ypea or printed name of person signing)
Owner President
(Title of person signing)

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