

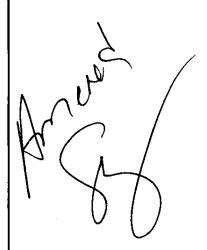
(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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(Do	cument Number)	
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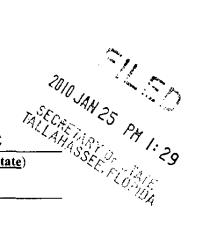
COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF COR	PORATION: HITCHE	D WEDDINGS & EVENT F	RENTALS INC
DOCUMENT NU	JMBER:	P07000112460	
The enclosed Artic	cles of Amendment and fee a	are submitted for filing.	
Please return all co	orrespondence concerning th	is matter to the following:	
		MARQUEZ, LUIS Name of Contact Person	
	1.	value of Contact Person	
	HITCHED WED	DINGS & EVENT RENTALS IN	IC
		Firm/ Company	
		9771 NW 91 CT	<u> </u>
		Address	
		EDLEY, FL 33178	
	C	City/ State and Zip Code	
	E-mail address: (to be use	ed for future annual report notification)	
For further inform	ation concerning this matter,	please call:	
N	IARQUEZ, LUIS	at (305)30	00-1939
Name	e of Contact Person	Area Code & Daytime Tel	ephone Number
Enclosed is a chec	k for the following amount n	nade payable to the Florida Depart	ment 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)
P.O. Box 6	nt Section • f Corporations 327	Street Address Amendment Section Division of Corporations Clifton Building	
Tallahasse	e, FL 32314	2661 Executive Center Circl	e

Tallahassee, FL 32301

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



HITCHED WEDDINGS & EVENT RENTALS INC

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

P07000112460

(Document Number of Corporation (if known)

owing

name must be distinguishable and contain the word "corporation," "company," or "incorporated" or abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation must contain the word "chartered," "professional association," or the abbreviation "P.A." 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) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent: MARQUEZ, LUIS 1610 NW 118 TERRACE New Registered Office Address: (Florida street address)			The new
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent: MARQUEZ, LUIS 1610 NW 118 TERRACE	abbreviation "Corp.," "Inc.," or Co.," or	the designation "Corp," "Inc," or "Co". A	professional corporation
D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent: MARQUEZ, LUIS 1610 NW 118 TERRACE			
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Name of New Registered Agent: MARQUEZ, LUIS 1610 NW 118 TERRACE			
Name of New Registered Agent: MARQUEZ, LUIS 1610 NW 118 TERRACE			
1610 NW 118 TERRACE			the name of the
		egistered office address:	
	new registered agent and/or the new r		
PEMBROKE PINES, Florida_33026	new registered agent and/or the new r	MARQUEZ, LUIS 1610 NW 118 TERRACE	
(City) (Zip Code)	new registered agent and/or the new r	MARQUEZ, LUIS 1610 NW 118 TERRACE (Florida street address)	. Florida_ <u>33026</u>

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)

<u>Title</u>	Name	Address	Type of Action
<u>PD</u>	MARQUEZ, LUIS B	1610 NW 118 TERRACE PEMBROKE PINES, FL 33026	☐ Add ☑ Remove
<u>VPD</u>	MARQUEZ, LUIS	1610 NW 118 TERRACE PEMBROKE PINES, FL 33026	☐ Add ☑ Remove
<u>P</u>	MARQUEZ, LUIS	1610 NW 118 TERRACE PEMBROKE PINES FL 33026	☑ Add ☐ Remove
	ng or adding additional Articles, enter ditional sheets, if necessary). (Be spec		
provision	endment provides for an exchange, reconst for implementing the amendment if applicable, indicate N/A)	classification, or cancellation of issues to the contained in the amendment in	ued shares, eself:

The date of each amendmen	t(s) adoption: <u>01/01/2010</u>
Effective date if applicable:	01/01/2010 (date of adoption is required)
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
	ere adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.
	ere 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 votes	cast for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
The amendment(s) was/we action was not required.	ere adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/we action was not required.	ere adopted by the incorporators without shareholder action and shareholder
selo	a director, president or other officer – if directors or officers have not been exted, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)
	(Typed or printed name of person signing)
	(Title of person signing)