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Florida Department of State

Division of Corporations Public Access System

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Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number: 072450003255 Phone: (305)634-3694

Fax Number : (305)633-9696

SECRETARY OF STATE DIVISION OF CORPORATION OF CORPORATION

COR AMND/RESTATE/CORRECT OR O/D RESIGN

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ALLAHASSEE. FLORIDA

LUGGAGE PLUS INC

estimated Charge	\$35.00	
age Count	04	
Certified Copy	0	
Certificate of Status	Û	
المعادلة بالروادية والماليات والمراوية والمستوارية المحادث المستوارية المستوارية والمستوارية والمستوارية المستوارية المستوارية المستوارية المستوارية والمستوارية	Maria de contrata et al Maria de la Compania de la	

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Articles of Amendment H09000035 Articles of Incorporation LUGGAGE PLUS INC (Name of Corporation as currently filed with the Florida Dept. of State) P08000067338 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST RE 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: (Florida street address) New Registered Office Address: Florida (City) (Zip Code) 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

Signature of New Registered Agent, if changing

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H09000035743

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position.

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
<u>D</u>	ELI BOKOBZA	108 SE 1ST STREET MIAMIL FL 33131	O Add O Remove
<u>D</u>	GISELLE BOKOBZA	108 SE 181 STREET MIAMI, FL 33131	Add Remove
E. If amej	nding or adding additional Articles additional sheets, if necessary). (B	i, enter change(s) here: le specific)	
<u>provis</u>	mendment provides for an exchanton for implementing the amending the amending the amending the amending the applicable, indicate N/A)	ge, reclussification, or cancellation of cancellation of cancellation of the amendm	of issued shares. ont itself:
		Page 2 of 3	

The date of each amendment(s) adoption:	08/01/2008 409000035743		
Effective date if applicable: 08/01/2008 fno more that	n 90 days after amendment file date)		
Adoption of Amendment(s)	CHECK ONE)		
The amendment(s) was/were adopted by by the shareholders was/were sufficient f	the shareholders. The number of votes cast for the amendment(s) for approval.		
☐ The amendment(s) was/were approved by must be separately provided for each vot	y the shareholders through voting groups. The following statement ing group entitled to vote separately on the amendment(s):		
"The number of votes cast for the an	nendment(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 action was not required.	the incorporators without shareholder action and shareholder		
Dated 08/01/2008 Signature Linds Charles			
(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)			
	GISELLE BOKOBZA		
. (Typed or printed name of person signing)		
	DIRECTOR		
	(Title of person signing)		

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