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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: ROCK My World Clothing, Inc.					
DOCUMENT NUMBER: POSCOCO 98600					
The enclosed Articles of Amendment and fee are submitted for filing.					
Please return all correspondence concerning this matter to the following:					
Kelly Hamlin Sikes (Name of Contact Person)					
Bock My World Clothing, Inc.					
300 Cherry St. #6					
Panama City Fl. 32401 (City/ State and Zip Code)					
For further information concerning this matter, please call:					
(Name of Contact Person) at (80) 532 - 1234 on 763 - 3034 (Area Code & Daytime Telephone Number)					
Enclosed is a check for the following amount made payable to the Florida Department of State:					
\$35 Filing Fee \$\begin{array}{c} \$43.75 Filing Fee &					
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle					

Tallahassee, FL 32301

Articles of Amendment

to

Articles of Incorporation of

- Rock my wo	orld (Jothine	Inc.
(Name of Corporation as current	tly filed with the Florida Dept. of St	ate)
	er of Corporation (if known)	609
(=	•	
Pursuant to the provisions of section 607.1006, following amendment(s) to its Articles of Incorpo		Corporation adopts the
A. If amending name, enter the new name of the	he corporation:	
Ashton Nichola	e, Inc.	
The new name must be distinguishable and "incorporated" or the abbreviation "Corp.," "." "." "." "." "." "." "." "." "." ".	Inc.," or Co.," or the designation	"Corp," "Inc," or
B. Enter new principal office address, if applic		
(Principal office address MUST BE A STREET	ADDRESS)	'Šv
		- 19 F
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	t pav	SSS
(Mailing uturess MAI BE A FUST OF FICE	E BUA)	न्यू 🕏 🔟
		AI G
D. If amending the registered agent and/or reg	gistered office address in Florida, en	iter the name of the
new registered agent and/or the new register		
Name of New Registered Agent:		
New Registered Office Address:	(Florida street address)	_
		, Florida
-	(City)	(Zip Code)
New Registered Agent's Signature, if changing I hereby accept the appointment as registered of		ept the obligations of the
position.		
Sie	nature of New Registered Agent, if ch	anging
~ .0	,	

... Bu

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
				Add Remove
				Add Remove
 	Minutes			Add Remove
		g or adding additional Articles, enter chional sheets, if necessary). (Be specific		
F. <u>II</u>	<u>rovisions</u>	ndment provides for an exchange, reclassifier implementing the amendment if no applicable, indicate N/A)	sification, or cancellation of iss t contained in the amendment i	ued shares, tself;

The date of each amendment(s) adoption: 2-20-09				
Effective date if applicable: (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 2 - 20 - 09				
Signature Helle D. Selver				
(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)				
Typed or printed name of person signing)				
(Typed or printed name of person signing)				
President/owner				
(Title of person signing)				