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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



COVER LETTER

TO: Amendment Section · Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

NAME OF CORPOR	RATION: TWO	O'S AND 4'S LUXURY APP	AREL INC
DOCUMENT NUMB	BER:	P09000025669	
The enclosed Articles	of Amendment and fee	are submitted for filing.	
Please return all corres	spondence concerning th	nis matter to the following:	
	M	IYRIAM COKMANN	
·]	Name of Contact Person	
	TWO'S AND	O 4'S LUXURY APPAREL INC	
	Firm/ Company		
	3000 S. OCEAN DRIVE SUITE 714		
Address			
		WOOD, FLORIDA 33019 City/ State and Zip Code	
		city, state and zip code	
	E-mail address: (to be us	ed for future annual report notification)	
For further information	n concerning this matter	, please cali:	
<u> </u>	M COKMANN	at \	04-1460
Name of C	Contact Person	Area Code & Daytime Te	•
	_	made payable to the Florida Depar	
\$35 Fiting Fee	□ \$43.75 Filing Fee & Certificate of Status	☑ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Addr		Street Address Amendment Section	
Amendment Section Division of Corporations		Division of Corporations	

Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle

Articles of Amendment **Articles of Incorporation** of

TWO'S AND 4'S LUXURY APPAREL INC

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

•	to	_	•
•	Articles of Incorporation of	П	4. ~ £
TIMO'S AND A'S		INC S	OS ALLES ON I.
(Name of Corporation as curr	LUXURY APPARE	a Dent. of State)	
	0000025669		The same of the sa
	nber of Corporation (if kno	<u></u>	SKO 1.
Pursuant to the provisions of section 607.100 amendment(s) to its Articles of Incorporation:	6, Florida Statutes, this F		75/2 1/
A. If amending name, enter the new name of	f the corporation:		·
TWO'S AND FOU	R'S LUX: RY APPARE	L INC	The new
abbreviation "Corp.," "Inc.," or Co.," or the name must contain the word "chartered," "pre			Fermion
(Principal office address <u>MUST BE A STRE)</u> C. <u>Enter new mailing address, if applicable</u>	<u></u>		
(Principal office address <u>MUST BE A STRE)</u>	<u></u>		
(Principal office address MUST BE A STRE) C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF) D. If amending the registered agent and/or new registered agent and/or the new registered agent an	ET ADDRESS) EXECT BOX registered office address in	n Florida, enter the name o	
(Principal office address MUST BE A STRE) C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF) D. If amending the registered agent and/or	ET ADDRESS) EXECT BOX registered office address in	n Florida, enter the name o	f the
(Principal office address MUST BE A STRE) C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF) D. If amending the registered agent and/or new registered agent and/or the new registered agent an	ET ADDRESS) EXECT BOX registered office address in		
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF) D. If amending the registered agent and/or new registered agent and/or the new registered Agent:	ET ADDRESS) E CE BOX) registered office address in stered office address: (Florida street a	ddress), Florida	<u>f the</u>
D. If amending the registered agent and/or new registered agent and/or the new registered agent: Name of New Registered Agent:	ET ADDRESS) CE BOX registered office address in stered office address:	ddress)	f the

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>	<u>Name</u>	Address	Type of Action
E. If amen	nding or adding additional Artical Artical Artical Artical Sheets, if necessary).	cles, enter change(s) here:	
	idattional sneets, if necessary).	(Be specific)	
-			
			· · · · · · · · · · · · · · · · · · ·
provisi	<u>ions for implementing the ame</u>	hange, reclassification, or cancellandment if not contained in the am	ition of issued shares, endment itself:
(1)	not applicable, indicate N/A)		

<u> </u>			

The date of each amendment(s) a	dontion: AUGUST 15, 2009
	(date of adoption is required)
Effective date <u>if applicable</u> : '	more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were ad by the shareholders was/were s	lopted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.
	oproved by the shareholders through voting groups. The following statement reach 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	.,,
(voi	ting group)
The amendment(s) was/were ac action was not required.	dopted by the board of directors without shareholder action and shareholder
The amendment(s) was/were ac action was not required.	dopted by the incorporators without shareholder action and shareholder
Dated	25/09
Signature	Mann,
	irector, president or other officer – if directors or officers have not been
	I, by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)
	MYRIAM COKMANN
	(Typed or printed name of person signing)
	PRESIDENT/DIRECTOR
	(Title of person signing)