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DIVISION OF CORPORATIONS

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COVER LETTER

TO: Amendment Section

Division of Corporations	*		
NAME OF CORPORATION:	Lycra	Inc.	
NAME OF CORPORATION:	209000027.	ተያባ	
The enclosed Articles of Amend	iment and fee are su	bmitted for filing.	
Please return all correspondence	e concerning this ma	tter to the following:	
2.4	web Divet		
	20 / INCOMO	Name of Contact Perso	n
1.	4 Ca T.		e
	The.	Firm/ Company	
136	84 Exotica	Comme	
<u></u>	<u> </u>	Address	
ω	Mington F	1 33414	
)	City/ State and Zip Cod	e
E-m:	ail address: (to be us	amail. Com sell for future annual report	notification)
For further information concerni	ng this matter, pleas	se call:	
0			
Kabert Veliko	D	at (_ S_0)	de & Daytime Telephone Number
Name of Contact	Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for the follo	wing amount made	payable to the Florida Depa	artment of State:
\$35 Filing Fee	3.75 Filing Fee & rtificate 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)
Mailing Addr			Address
	Amendment Section Amendment Section Division of Corporations Division of Corporations		
P.O. Box 6327	•		Building
Tallahassee, F			xecutive Center Circle
		Tallaha	issee, FL 32301

Articles of Amendment to Articles of Incorporation of

Lycra Inc		
(Name of Corporation as currently filed with the F	lorida Dept. of State)	_
909 0000 22489		_
(Document Number of Corporation (i	if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following	ng amendment(s) to
A. If amending name, enter the new name of the corporation:		
Lycra Consulting Inc.		The new
name must be distinguishable and contain the word "corporation" ("Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "word "chartered," "professional association," or the abbreviation "	n," "company," or "incorporated" or the coor. A professional corporation name must 'P.A."	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	4/k	_
,		_
C. Enter new mailing address, if applicable:	.1	12 DIVIS
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	λ/ν	- 五號
		- 1
		- FOR
D. If amending the registered agent and/or registered office addr new registered agent and/or the new registered office address		AH 8: 59
Name of New Registered Agent		
(Florida stre	eet 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 w	vith and accept the obligations of the position.	
Signature of New Registered A	toent 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)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT</u> <u>Jo</u>	ohn Doe	
X Remove	<u>v</u> <u>n</u>	1ike Jones	
X Add	<u>sv</u> <u>s</u>	ally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add Remove			
2) Change Add Remove		<u></u>	
3) Change Add Remove			
4) Change Add Remove			
5) Change Add Remove			
6) Change Add Remove			

E. If amending or adding additional Artic (attach additional sheets, if necessary).	cles, enter change(s) here: (Be specific)
	
F. If an amendment provides for an excha provisions for implementing the amen (if not applicable, indicate N/A)	inge, reclassification, or cancellation of issued shares, dment if not contained in the amendment itself:
····	

The date of each amendment(s) adoption: Ҷ‐2Ӧ‐ 2つに
Effective date if applicable: 5-\-2012 (no more than 90 days after amendment file date)
(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
(voing 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 4 - 20, - 2012
Signature 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)
- Robert Devlik
(Typed or printed name of person signing)
Diacho
(Title of person signing)