## P0900030119

(Re	questor's Name)		
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TALLAHASSEE, FLOREN

Chry

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF COR	PORATION:	MIRELLEMUS	IC INC		
DOCUMENT N	CUMENT NUMBER: P0900030119				
The enclosed Artic	cles of Amendment and fee	are submitted for filing.			
Please return all co	orrespondence concerning th	his matter to the following:			
		Melissa Angel			
		Name of Contact Person			
	Brito & Brito Accounting Firm/ Company				
		Time Company			
407 Lincoln Road Suite 300					
		Address			
		ami Beach, Fl 33139			
	'	City/ State and Zip Code			
	E-mail address: (to be us	ed for future annual report notif	ication)		
For further inform	ation concerning this matter	r, please call:			
	Melissa Angel	at ( 305 )	534-9292		
Name of Contact Person		Area Code & Da	ytime Telephone Number		
Enclosed is a chec	k for the following amount	made payable to the Florid	a Department of State:		
	\$43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee & Certified Copy (Additional copy is en	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	sed)	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327		Street Address Amendment Section Division of Corpora Clifton Building			

2661 Executive Center Circle

Harris Tallahassee, FL 32301

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

rellemusic, Inc	; •		
		f State)	
0900030119		•	
	ion (if known)		
006, Florida Statu n:	tes, this <i>Florida Pro</i>	ofit Corporation a	idopts the following
of the corporatio	<u>n:</u>		
			The new
the designation "Corofessional associant of the professional associant of the profession of the profes	orp," "Inc," or "Coation," or the abbre  19550 Ambass  Miami, Fl 33179  19550 Ambassa  Miami, Fl 33179	o". A professiona eviation "P.A." ador Ct	rated" or the alcorporation FILED FILED FILED FILED
		<u>, enter the name (</u>	of the
Mirelle Teixe	ira	<del></del>	1
19550 Amba	ssador Ct		
(Flor	ida street address)		
Miami (City)		, Florida 33 (Zip Code)	179
d agent. Tam fami	Titar with and accept		<sup>c</sup> the position.
	umber of Corporate  006, Florida Status  of the corporation  the word "corporation the designation "Corporation associated associate	umber of Corporation (if known)  006, Florida Statutes, this Florida Process  of the corporation:  of the word "corporation," "companhe designation "Corp," "Inc," or "Corporation," or the abbreviate of the corporation, and the designation "Corp," "Inc," or "Corporation," or the abbreviate of the corporation, and the word "corporation," or the abbreviate of the corporation, and the word "corporation," or the abbreviate of the corporation, and the word "corporation," or the abbreviate of the corporation, and the word "corporation," or the abbreviate of the abbreviate of the abbreviate of the corporation, and the word "corporation," or the abbreviate of t	umber of Corporation (if known)  006, Florida Statutes, this Florida Profit Corporation at the word "corporation," "company," or "incorporation designation "Corp," "Inc," or "Co". A professional association," or the abbreviation "P.A."  pplicable: 19550 Ambassador Ct  EET ADDRESS)  Miami, Fl 33179  Pregistered office address in Florida, enter the name of gistered office address:  Mirelle Teixeira  19550 Ambassador Ct  (Florida street address)  Miami , Florida 33  (City) (Zip Code)

## 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 T Carlos Eduardo De Campos 19550 Ambassador Ct ☐ Remove \_\_\_\_\_ 🔲 Add E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific) PD ADDRESS CHANGE 19550 Ambassador Ct, Miami, FI 33179 VP ADDRESS CHANGE 19550 Ambassador Ct, Miami, Fl 33179 S ADDRESS CHANGE 19550 Ambassador Ct, Miami, Fl 33179 F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)

The date of each amendmen	t(s) adoption: June 11 2009
Effective date <u>if applicable</u> :	June 11 2009 (date of adoption is required)
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	( <u>CHECK ONE</u> )
	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 end 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)
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.	re adopted by the incorporators without shareholder action and shareholder
Dated_June Signature	± 11 2009
(By	a director, president or other officer – if directors or officers have not been ected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)
	Mirelle Teixeira
	(Typed or printed name of person signing)
	President
	(Title of person signing)