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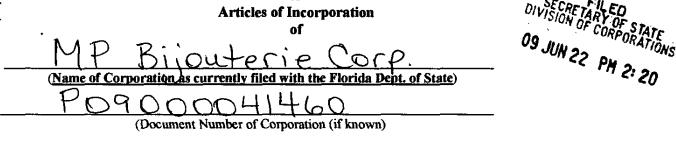
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COVER LETTER

TO: Amendment Section
Division of Corporations

ϵ						
NAME OF CORPORATION: MP Bijouterie Corp.						
DOCUMENT NUMBER: P0900041460						
The enclosed Articles of Amendment and fee are submitted for filing.						
Please return all correspondence concerning this matter to the following:						
Francisco J. Fernander Name of Contact Person						
Prats Fernandez & Co.						
2121 Ponce de Leon Blvd., Swite 240						
Coral Gables FL 33134 City/State and Zip Code Info a pratsfernandez.com E-mail address (to be used for future annual report notification)						
For further information concerning this matter, please call: Francisco J. Fernandez at (305) 444-8333 Name of Contact Person Area Code & Daytime Telephone Number						
Enclosed is a check for the following amount made payable to the Florida Department of State:						
\$35 Filing Fee \$\ Certificate of Status \$\ Certificate of Status \$\ (Additional copy is enclosed)\$\$ \$52.50 Filing Fee \$\ Certificate of Status \$\						
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301						

Articles of Amendment to Articles of Incorporation



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	<u>.</u>		
MARTINA B	XVOTI	CORP.	1	The new
ame must be distinguishable and contain bbreviation "Corp.," "Inc.," or Co.," or the ame must contain the word "chartered," "pr	e designation "Co	rp," "Inc," or "C	lo". A professiona	
3. Enter new principal office address, if an Principal office address <u>MUST BE A STRE</u>				_
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 reg			a, enter the name (of the
Name of New Registered Agent:			<u>_</u>	
New Registered Office Address:	(Florid	a street address)		
	(City)		, Florida (Zip Code)	
New Registered Agent's Signature, if chans hereby accept the appointment as registered	zing Registered Ag	ent: iar with and accep	•	the position.
	Signature of New I	Registered Agent,	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) Address Type of Action <u>Name</u> _ | Add _____ Remove _____ ☐ Add ☐ Remove E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific) 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 amendment(s) adoption:
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(by the shareholders was/were sufficient for approval.
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statem 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)
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 6/11/09
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)
Edith Prepelitchi (Typed or printed name of person signing)
President (Title of person signing)