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SECRETARY OF STATE DIVISION OF CORPORATIONS

T 900cms JUN 26/2019

COVER LETTER

TO: Amendment Section Division of Corporations				
NAME OF CORPORATION: Belongings 1	mc			
DOCUMENT NUMBER: P0900049568				
The enclosed Articles of Amendment and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
Harita Pastoriza Name of Contact Person				
Beloved Belongings Inc	<u>-</u>			
1100 NW 87th are gpt 106				
Coral Springs, FL 33071 City/State and Zip Code				
beloved belongings Cholmail. (c E-mail address: (to be used for Auture abnual report notification)	<u>7</u> m			
For further information concerning this matter, please call: Concerning this matter, please call: Concerning this matter, please c				
Enclosed is a check for the following amount made payable to the Florida Department of	of State:			
Certificate of Status Certified Copy Cert (Additional copy is enclosed) Cert	.50 Filing Fee tificate of Status tified Copy Iditional Copy is enclosed)			
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301	·			

Articles of Amendment to Articles of Incorporation of

SECRETARY OF STATE DIVISION OF CORPORATIONS

	ALLIANION
in Inc. 09 JUN 24 F	H 3: 41
	• ••
(if known)	
this Florida Profit Corporation adopts the	ne followi
The	e new
o," "Inc," or "Co". A professional corpo	ration
N3/A	
N/A	
N/A	
<u>ess:</u>	
)/A	
street address)	
N/A Florida	
(Zip Code)	
	ition.
4	
	The ation, " "company," or "incorporated" of the abbreviation "P.A." N/A N/A A A A A A A A A

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>	<u>Address</u>	Type of Action
Officer Director Educardo Pastoriza	apt 106 Coral Spring, FL33	_ Add
	Coral Spring, FL38	Kelliove
		_
	·	_
		_ □ Add _ □ Remove
		
E. If amending or adding additional Articles, enter (attach additional sheets, if necessary). (Be specified)		
. 1.	w/	
N/A		
F. If an amendment provides for an exchange, recognitions for implementing the amendment if	classification, or cancellation of is	ssued shares,
(if not applicable, indicate N/A)		
10/11		

The date of each amendment(s) adoption:	2/09
Effective date if applicable: (date of adoption is re	quired)
. (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 numb by the shareholders was/were sufficient for approval.	per of votes cast for the amendment(s)
The amendment(s) was/were approved by the shareholders through v must be separately provided for each voting group entitled to vote se	
"The number of votes cast for the amendment(s) was/were suffic	cient for approval
by	,,
(voting group)	
The amendment(s) was/were adopted by the board of directors without action was not required.	ut shareholder action and shareholder
The amendment(s) was/were adopted by the incorporators without sh action was not required.	areholder action and shareholder
Dated 06/22/09	
Signature	irectors or officers have not been of a receiver, trustee, or other court
Waritza Pas (Typed or printed name of pe	storiza
	In corporator/Owner