Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H090002411643)))



H090002411643ABC.

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : GERALD WEINBERG, P.C.

Account Number : I20030000043 Phone : (800)342-9856 Fax Number : (800)354-3381

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

TALLAHASSELT EST

FILED STATE SECRETARY OF STATE FALLAHASSEE, FLORIDA

COR AMND/RESTATE/CORRECT OR O/D RESIGN CORSAGE COLLECTION, INC.

NOV 13 AM 8: 0 Netary of State ahassee: florig

 Certificate of Status
 0

 Certified Copy
 0

 Page Count
 04

 Estimated Charge
 \$35.00

(1a 11/10/09

Electronic Filing Menu

Corporate Filing Menu

Help

No. 8634 P. 3

(HOTUDUS411643)

Articles of Amendment to Articles of Incorporation

	Articles of Inc of	-		·
	CORSAGE COLLECTI	ON INC.		
	(Name of Corporation as currently filed with	the Florida Dept. o	(State)	
	P09000089153	3		
	(Document Number of Corpora	tion (if known)	_	
	ant to the provisions of section 607.1006, Florida State denent(s) to its Articles of Incorporation:	utes, this <i>Florida Pr</i> e	ofit Corporation ado	pts the following
A. <u>I</u>	smending name, enter the new name of the corporati	on:		
	MONACO EXCHANG	E INC.		The new
abb#	must be distinguishable and contain the word "control or Co.," or the designation "(must contain the word "chartered," "professional association or the designation of the must contain the word "chartered," "professional associations".	Corp," "Inc," or "C	o", A projessional c	ed" or the corporation
	nter new principal office address, if applicable: cipal office address <u>MUST BE A STREET ADDRESS</u>)			TAISE
C.]	Enter new mailing address, if applicable: Mailing address <u>MAY BE A POST OFFICE BOX</u>)			SECRETARY OF LORIDA FALLAHASSEE, FLORIDA O9 NOV 13 AM 8: 14
D. <u>I</u>	smending the registered agent and/or registered office a ew registered agent and/or the new registered office a	<u>ce address in Florida</u> ddress:	, enter the name of	<u>the</u>
	Name of New Registered Agent:			
	New Registered Office Address: (Flo	orida street address)		
	(City		, Florida (Zip Code)	
<u>New</u> I her	Registered Agent's Signature, if changing Registered eby accept the appointment as registered agent. I am far	Agent: niliar with and accep w Registered Agent, i		ve position.
	gignature of Ne	w registereu Agent, i	j crianging	

Page 1 of 3

(HU90000411643)

(Attach additional sheets, if necessary)

Title	<u>Name</u>	Address	Type of Action				
	,						
	ng or adding additional Articles, ente itional sheets, if necessary). (Be spec						
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)							

-Nov. 13 2009 2:35PMO4	ð)	No. 8634 P.
The date of each amendment(s) a	doption: 11/12/2009	
r	(date of adoption is required)	
Effective date if applicable:	more than 90 days after amendment file date)	
1		
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes afficient for approval.	cast for the amendment(s)
	proved by the shareholders through voting group each voting group entitled to vote separately or	
"The number of votes cast	for the amendment(s) was/were sufficient for ap	proval
by		
(vot	ing group)	
The amendment(s) was/were ad action was not required.	opted by the board of directors without sharehol	der action and shareholder
The amendment(s) was/were ad- action was not required.	opted by the incorporators without shareholder a	action and shareholder
Dated 11/12/20	009	
Signature	SEAB	
	rector, president or other officer - if directors or	
	, by an incorporator — if in the hands of a receive ad fiduciary by that fiduciary)	r, trustee, or other court
αρφοιιπο	a new interest of maritaneimy,	
	ISRAEL AMINOV	
_	(Typed or printed name of person signif	ng)
	PRESIDENT	
	(Title of person signing)	- —

Page 3 of 3

(H090U02411643)