

(Re	equestor's Name)	
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(Cit	ty/State/Zip/Phone	· #)
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PICK-UP	☐ WAIT	MAIL
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(DC	ocument Number)	
Certified Copies	_ Certificates	of Status
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JUL 29 2019 I ALBRITTON

Tallahassee, Fl. 32314

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: Italian	no Flash	ion Inc.	
DOCUMENT NUMBI	~ / 4 4	ppp815	33	
The enclosed Articles of	f.Amendment and fee are sul	bmitted for filing.		
Please return all corresp	ondence concerning this mat	ter to the following:		
	ARteu	n Gole	man	
_	Bri	Name of Contact Perso	in Luc.	
_	208	NW 6-th	Aue	
_	Hallandale	e F4 3	3009	
A2-	E-mail address: (to be us	ed for future annual report	notification)	•
Artem	Goldman	at (203	274 - 1136 de & Daytime Telephone Number	
Name of	Contact Person	Area Ce	ode & Daytime Telephone Number	
Enclosed is a check for	the following amount made p	payable to the Florida Dep	artment of State:	
\$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Amen Divisi	ng Address dment Section on of Corporations Box 6327	Ameno Divisio	Address Iment Section on of Corporations i Building	

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment

Articles of Incorporation of

Italiano	Fashion	Inc.

(Name of Corporation as currently filed with the Florida Dept. of State)

(Document Number of Corporation (if known)

(s) to

BRIXWE	hh lv	<u>,c.</u>	The new
name must be distinguishable and conta "Corp.," "Inc.," or Co.," or the designal word "chartered," "professional association	tion "Corp," "Inc," or	"Co". A professional con	orporated" or the abbreviation poration name must contain the
B. Enter new principal office address, if Principal office address <u>MUST BE A ST</u>		-N/P	4
C. <u>Enter new mailing address, if applica</u> (Mailing address <u>MAY BE A POST O</u>		N/A	19.11. 22
	·		
D. If amending the registered agent and new registered agent and/or the new Name of New Registered Agent			name of the
	(Florida	street address)	
New Registered Office Address:	N/A	(City)	Florida(Zip Code)
	anging Registered Age		

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 Doc 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 Doc. PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change PT John Doc Not Amending Arthonzed ? X Remove $\underline{\mathbf{V}}$ Mike Jones Sally Smith <u>X</u> Add <u>Tigle</u> Type of Action Name (Check One) 1) ____ Change Add Remove 2) ____ Change ____ Add ____ Remove 3) ____ Change ___ Add __ Remove 4) ____ Change ___ Add Remove 5) ____ Change Add __ Remove Change ___ Add ____ Remove

E. If amending or adding additional Articles, ent (Attach additional sheets, if necessary). (Be sp	ter change(s) here: becific)
· · · · · · · · · · · · · · · · · · ·	——————————————————————————————————————
	
 If an amendment provides for an exchange, re provisions for implementing the amendment 	if not contained in the amendment itself:
(if not applicable, indicate N/A)	A
	-

		NA		The standard standard
The date of each amendment(s) a date this document was signed.	adoption:			, if other than the
Effective date <u>if applicable</u> :	NA			
	(na more than	n 90 days after amend	lment file date)	
Note: If the date inserted in this document's effective date on the L			ng requirements, this dat	te will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)			
The amendment(s) was/were ad by the shareholders was/were s		The number of votes of	ast for the amendment(s)
☐ The amendment(s) was/were apmust be separately provided for				nt
"The number of votes cas	st for the amendment(s) was/v	were sufficient for app	proval	
by	(voting group)		·"	
☐ The amendment(s) was/were action was not required.	dopted by the board of directo	ors without sharehold	er action and shareholder	r
☐ The amendment(s) was/were action was not required.	dopted by the incorporators w	zithout shareholder ac	tion and shareholder	
Dated	117/2019 Usem Gold			
Signature _	Hem Gold	man /	Edutied	F-Sh-9~
	director, president or other o ed, by an incorporator - if in	fficer – if directors or	officers have not been	
	nted fiduciary by that fiducia			
,	Artem Gold (Typed or prints	man ded name of person sig	EdwARd F	-i Shm An
	9v	/ 1/	P	
		le of person signing)		