# P10000084744

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TO: Amendment Section **Division of Corporations** 

NAME OF CORPO	ORATION: Omluxe, Inc.			
DOCUMENT NUM	MBER: P10000084744			
The enclosed <i>Article</i>	es of Amendment and fee are su	bmitted for filing.		
Please return all corr	respondence concerning this ma	tter to the following:		
	Pamela Jones			
		Name of Contact Perso	n	
		Firm/ Company		
	10 Venetian Way, #2001			
	·	Address		
	Miami Beach, FL 33139			
		City/ State and Zip Cod	e	
pam	nelajonesphotographic@gmail.c	om	·	<b>بــ</b> ــ
	E-mail address: (to be us	sed for future annual report	notification)	17 HAY -5
				2
For further informati	on concerning this matter, pleas	se call:		
Pamela Jones		at (	249-2115	
Name	e of Contact Person	Area Co	de & Daytime Telephone Number	ا ئ: 47
Enclosed is a check:	for the following amount made	payable to the Florida Depa	artment of State:	
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy	

# 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

is enclosed)

### Articles of Amendment to Articles of Incorporation of

Omluxe, Inc.				
(Name of Corporation P10000084744	on as currently filed w	ith the Florida Dept. of State)		
***	. N. 1. CO			
(Docum	nent Number of Corpora	tion (if known)		
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	a Statutes, this <b>Florida F</b>	Profit Corporation adopts the follow	ring amend	dment(s) to
A. If amending name, enter the new name of the co	rporation:			
			The	new
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp, word "chartered," "professional Essociation," or the contains a second c	" "Inc," or "Co". A			
B. Enter new principal office address if applicable (Principal office address MUST BE A STREET ADD			<del></del>	<del></del>
				<u> </u>
C. Enter new mailing address if applicable: (Mailing address MAY BE A POST OFFICE BO	<b>X</b> )			istate 138
			-5	
D. If amending the registered agent and/or register new registered agent and/or the new registered.		orida, enter the name of the	AM 9:	CORPORI Y OF ST UGB
Name of New Registered Agent			_ 5	ATE ATTONS
	(Florida street addres	s)		
New Registered Office Address		, Florida		_
	(City)	(2)	p Code)	
New Registered Agent's Signature, if changing Regi			_	
I hereby accept the appointment as registered agent.	ı am ramınar with and a	коаря тпе оондатоп's от the position	i.	
San	ature of New Registered	Agent, if changing	<del></del>	

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

Example: X Change	<u>PT</u>	John Doe	
X Remove	Y	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) X Change	P	Pamela Jones	10 Venetian Way, #2001
Add			Miami Beach, FL 33139
Remove		•	
2) Change	P	Jennifer L. Safina	1314 E Las Olas Blvd, Ste 217
Add			Ft. Lauderdale, FL 33304
X Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

		(Be specific)
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provisions for imp	or ovides for an exciplementing the ame able, indicate N/A)	hange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
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provisions for imp	plementing the ame	hange, reclassification, or cancellation of issued shares, and and in the amendment itself:

	4/18/17	
The date of each amendment(s) ad	option:	, if other than the
date this document was signed.	17	
Effective date if applicable: 4/18/		
	(no more than 90 days after amendment file date)	
<b>Note:</b> If the date inserted in this bl document's effective date on the Dep	ock does not meet the applicable statutory filing requirements, this artment of State's records.	date will not be listed as the
Adaption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adop by the shareholders was/were suf	oted by the shareholders. The number of votes cast for the amendmen ficient for approval.	nt(s)
	oved by the shareholders through voting groups. The following state each voting group entitled to vote separately on the amendment(s):	ment
	or the amendment(s) was/were sufficient for approval	
by	,"	
	(voting group)	
The amendment(s) was/were adopaction was not required.	oted by the board of directors without shareholder action and shareholder	lder
☐ The amendment(s) was/were adopaction was not required.	eted by the incorporators without shareholder action and shareholder	
DatedSignature		
	ector, president or other officer – if directors or officers have not been, by an incorporator – if in the hands of a receiver, trustee, or other co	
	ed fiduciary by that <u>fi</u> duciary)	,dit
1 -	Pamela Jones Pamela Jones	
	(Typed or printed name of person signing)	
•	Vice-President	
~	(Title of person signing)	