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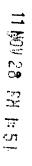
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Mollin

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: MILLANO SUNGI	ASSES AND HAND BA	AGS INC
DOCUMENT NUMBER: P11000059562		
The enclosed Articles of Amendment and fee are sub	mitted for filing.	
Please return all correspondence concerning this matt	er to the following:	
YOSSEF KALFA Nar	ne of Contact Person	
	Firm/ Company	.
<u>180 NE 12TH AVE 15A HALLAN</u>		
10V 142 12 11 11 1 1 1 1 1 1 1 1 1 1 1 1 1	Address	
HALLANDALE FL 33009 City	/ State and Zip Code	
YKACCOUNTING@YAHOO.COM E-mail address: (to be use For further information concerning this matter, please	d for future annual report	notification)
YOSSEF KALFA	at (954) 483-1453
Name of Contact Person		de & Daytime Telephone Number
Enclosed is a check for the following amount made pa	ayable to the Florida Dep	artment of State:
☑ \$35 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 is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building xecutive Center Circle ussee, FL 32301

Articles of Amendment to **Articles of Incorporation**

MILLANO SUNGLASSES AND HAND BAGS INC

`known)	
nis <i>Florida Profit Corpor</i>	vation adopts the follo
"Inc," or "Co". A profe	essional corporation
	name of the
et address)	
, Florid	da(Zip Code)
	ons of the position.
t	f known) his Florida Profit Corpor ration," "company," or "i "Inc," or "Co". A profi " or the abbreviation "P.A ess in Florida, enter the particle address) , Floridation and accept the obligation of the colligation

• If AMENDING the Officers and/or Directors, please list all officers/directors of the corporation as you now want the record to be. Please indicate the title(s), name and address for each officer/director. (Our database can index up to 6 officers/directors. If you have more than 6 officers/directors, please list them on an

additional sheet.) Title(s) Address Name 1) DIR NATAN COHEN 20725 NE 16TH AVE A44 MAIMI FL 33179 2) DIR____ ARIE D. DANIEL 20725 NE 16TH AVE A44 MAIMI FL 33179 3)____ 5)____ 6)___ If REMOVING an officer and/or director, please list the title(s) and name of the officer/director to be removed: Title(s) Title(s) Name | <u>Name</u> 1)____ 2)____ 6)____ 3)____

If amending or adding additional Art (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)	
	
he date of each amendment(s) adoption:	
ne date of each amendment(s) adoption.	
ffective date <u>if applicable</u> : (no more than 90 days after amendment file date)	
(no more man 20 days after amenament fite date)	
Note that the second country over	
doption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendmen by the shareholders was/were sufficient for approval.	t(s)
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):	nent
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by"	
by" (voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and sharehold action was not required.	der
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 11/16/2011	
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 cou appointed fiduciary by that fiduciary)	
VOSSEE KALEA	
YOSSEF KALFA (Typed or printed name of person signing)	
(1) poe or printed manie or person digning)	
INCORPORATOR	
(Title of person signing)	