

**P110000059865**

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To:

Division of Corporations  
Fax Number : (850) 617-6380

From:

Account Name : ACCOUNTANT & MANAGEMENT INC  
Account Number : I20110000070  
Phone : (305) 541-3980  
Fax Number : (305) 541-7033

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

Email Address: \_\_\_\_\_

**COR AMND/RESTATE/CORRECT OR O/D RESIGN  
BARRERA'S FASHION INC**

Certificate of Status	0
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Page Count	05
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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
12 OCT 29 AM 11:25

*Amend*

OCT 30 2012

OCT 30 2012

10/29/2012 14:56 FAX

001/007

850-617-6381

10/24/2012 10:34:18 AM PAGE 1/001 Fax Server



October 24, 2012

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

BARRERA'S FASHION INC  
1815 W OKEECHOBEE RD  
HIALEAH, FL 33010

SUBJECT: BARRERA'S FASHION INC  
REF: P11000059865

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Please show street address for Rogelio Garcia.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Tina Roberts  
Regulatory Specialist II

FAX Aud. #: H12000255838  
Letter Number: 712A00026105

RECEIVED

12 OCT 29 AM 8:05

FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

P.O BOX 6327 - Tallahassee, Florida 32314

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COVER LETTER

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: BARRERA'S FASHION INCDOCUMENT NUMBER: P11000059865The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

JUAN ALBER

Name of Contact Person

ACCOUNTANT & MANAGEMENT

Firm/ Company

1549 NE 123RD ST

Address

NORTH MIAMI, FL 33161

City/ State and Zip Code

INFO@SOLUTIONSBYACCOUNTANTS.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JUAN ALBER

Name of Contact Person

at ( 305 ) 541-3980

Area Code &amp; Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department 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  
is enclosed)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

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Articles of Amendment  
to  
Articles of Incorporation  
of

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
12 OCT 29 AM 11:26

**BARRERA'S FASHION INC**

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

**P11000059865**

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

**A. If amending name, enter the new name of the corporation:**

*The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co." A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."*

**B. Enter new principal office address, if applicable:**  
(Principal office address MUST BE A STREET ADDRESS)

1081 W 29TH ST  
HIALEAH, FL 33012

**C. Enter new mailing address, if applicable:**  
(Mailing address MAY BE A POST OFFICE BOX)

1081 W 29TH ST  
HIALEAH, FL 33012

**D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:**Name of New Registered Agent **GARCIA, ROGELIO**

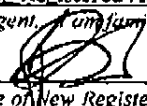
1081 W 29TH ST

(Florida street address)

New Registered Office Address: **HIALEAH**, Florida **33012**  
(City) (Zip Code)

**New Registered Agent's Signature, if changing Registered Agent:**

I hereby accept the appointment as registered agent, am familiar with and accept the obligations of the position.

  
Signature of New Registered Agent, if changing

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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:

☒ Change      PT      John Doe  
☒ Remove      V      Mike Jones  
☒ Add      SV      Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	PD	GARCIA, ROGELIO	1081 W 29 <sup>th</sup> ST Hialeah, FL 33012
2) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	P	BARRERA, JISCLY	1815 W OKEECHOBEE RD HIALEAH FL 33010
3) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	SEC	BARRERA, JISCLY	1815 W OKEECHOBEE RD HIALEAH FL 33010
4) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove			
5) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove			
6) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove			

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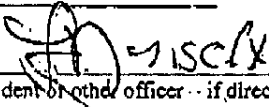
The date of each amendment(s) adoption: 10/22/12Effective date if applicable: \_\_\_\_\_  
(no more than 90 days after amendment file date)

## Adoption of Amendment(s) (CHECK ONE)

- ☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
- ☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):
- "The number of votes cast for the amendment(s) was/were sufficient for approval
- by \_\_\_\_\_"
- (voting group)
- ☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
- ☒ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Dated 10/22/12

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 court appointed fiduciary by that fiduciary)JISCLY BARRERA

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)