P12000005913

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	DRATION: MAIN STR MBER: P1200000591	EET VENTURE 3	S, INC.	_
The enclosed Article	es of Amendment and fee are su	bmitted for filing.		
Please return all corr	espondence concerning this ma	tter to the following:		
	MELVIN RATCLI	FF		14 OCT 15 PH 3: 10 TALLYHYZGEFF FLORID
		Name of Contact Person	n	
	BLUE CHIP DIV	AS, INC		5
		Firm/ Company		
	4727 NORTH A-	1-A		F 57 3: 1
		Address		35H 0
	VERO BEACH, F	L 32963		>
		City/ State and Zip Cod	e	
m	onica@monicawell	maker com		
		sed for future annual report	notification)	
	L man address. (to be a.	sed for fature armual report	nottreation)	
For further informati	on concerning this matter, pleas	se call:		
MELVIN RA	TCLIFF	at (772	, 538-2958	
Name	Name of Contact Person Area Code & Daytime Telephone		Number	
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 is enclosed)	
i f An Di P.G	ailing Address nendment Section vision of Corporations D. Box 6327 Ilahassee, FL 32314	Amend Divisio Clifton	Address Iment Section on of Corporations Building executive Center Circle	

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

MAIN STREET VENTUR	RES, INC			
	currently filed with the F	lorida Dept. of State)		
P12000005913				
(Documer	nt Number of Corporation (in	f known)		
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit Corpora	tion adopts the following	; amendment(s) to
A. <u>If amending name, enter the new na</u> BLUE CHIP DIVAS, INC				The new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	nation "Corp," "Inc," or "	Co". A professional o		breviation
B. Enter new principal office address, if applicable:		N/A		
(Principal office address MUST BE A S				
			- PO	2 77
C. Enter new mailing address, if appli (Mailing address MAY BE A POST)		N/A	An C	on :
(muning namess MAT BE A 1 031)	OTTICE BOX)		7.	景。
				بب <u>-</u>
			<u> </u>	
D. If amending the registered agent an			he name of the	
new registered agent and/or the nev	N/A	<u>.</u>		
Name of New Registered Agent	14// 1			
	(Florida str	eet address)		
Non Project 100 of 111	N/A	ŕ	N	
New Registered Office Address:	(City)	, r	Florida(Zip Code)	
New Registered Agent's Signature, if c	hanging Degistered Agent.			
I hereby accept the appointment as regist			gations of the position.	
<u></u>				
Siz	gnature of New Registered A	lgent, if changing		

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

Nike Jones, v as kemove	e, ana sai	ty smun, sv as an Aaa.	かしむの 言
Example: X Change	<u>PT</u>	John Doe	Address
X Remove	<u>v</u>	Mike Jones	67 5
X Add	<u>sv</u>	Sally Smith	The B
Type of Action (Check One)	<u>Title</u>	Name	Address Address
1) Change	-topens		
Add Remove			
2) Change Add	-		
Remove			
3) Change			
Add Remove			
4) Change			
Add			
Remove			
5) Change Add			
Remove			
6) Change			
Add			
Remove			

4	if necessary). (B	e specificj			
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f an amendment provid	les for an exchang	e, reclassificati	on, or cancellatio	n of issued shares.	
provisions for impleme	enting the amendm	ent if not conta	ined in the amen	dment itself:	
(if not applicable, i	ndicate N/A)				
4					
 					
					
	·				

The date of each amendment(s) adoption: date this document was signed.	, if other than the
Effective date if applicable: 10/15/2014	
(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	. <u> </u>
by"	
(voting group)	- 1
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.	TE PH 3: 10
	m O
Dated_10/09/2014	
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)	
MELVIN RATCLIFF	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	