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Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:		, 23

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : ACCOUNTANT & MANAGEMENT INC

Account Number : I20110000070 : (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 **CLOTHING COLLECTION INC**

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COVER LETTER

TO: Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

NAME OF CORPO	RATION: CLOTHING	COLLECTION	INC
	BER: P1200000757		
	of Amendment and fee are su		· · · · · · · · · · · · · · · · · · ·
Please return all corre	spondence concerning this mu	tter to the following:	
	OLIVIA MEDINA		
		Name of Contact Person	
	ACCOUNTANT 8	MANAGEMEN	IT
		Firm/ Company	
	1549 NE 123RD	ST	
		Address	
	NORTH MIAMI, F	FL 33161	
		City/ State and Zip Cod	<u> </u>
INF	O@SOLUTIONS	BYACCOUNTA	NTS COM
7741		sed for future annual report	
For further Information	n concerning this matter, pleas	se call:	
OLIVIA MED	INA	_ at (305	541-3980
Name of Contact Person			de & Daytime Telephone Number
Enclosed is a check for	or the following amount made	payable to the Florida Depo	artment of State:
—	Description 5		□\$52,50 Filing Fee
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		(Additional copy is	Certified Copy
		enclosed)	(Additional Copy is enclosed)
Ma	Shima A daluara	Stenet	Address
	iling Address endment Section		Iment Section
Division of Comorations		Divisio	on of Corporations

H15000032P253

Clifton Building

2661 Executive Center Circle Tallahussee, FL 32301

H120000356523

Articles of Amendment to Articles of Incorporation of

CLOTHING COLLECTION INC	
(Name of Corporation as currently filed with the Flor	ida Dept. of State)
(Document Number of Corporation (if kn	nown)
Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Articles of Incorporation:	rida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation," "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc." or "Co word "chartered," "professional association," or the abbreviation "P.)	". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	LL AND
·	- 9
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
·	
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:	in Florida, enter the name of the
Name of New Registered Agent	
(Florida street	address)
New Registered Office Address: (City)	Floridu
(3)	., .
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with	and accept the obligations of the position.
Signature of New Registered Age	nı, 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 litle by the first letter of the office litle:

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: XChange	PT	John Doe	
X Remove	¥	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>∆ddres</u> s
1) Change Add Remove	∨P	JOSE MISDRAJI	1808 NW 20TH ST MIAMI FL 33142 UŞ
2) Change Add Remove			
3) Change Add Remove			
4)Change Add Remove	<u></u>		
5) Change Add Remove			
6) Change Add Remove			

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If amending or adding additional Artic (attach additional sheets, if necessary).	(Be specific)		
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		<u> </u>	
f an amendment provides for an excha provisions for implementing the amen	nge, reclassification dment if not contain	n or cancollation of iss and in the amendment	wed shares. itself:
(if not applicable, indicate N/A)		\-\-\-\-\-\-\-\-\-\-\-\-\-\-\-\-\-\-\-	•
	·		
	<u> </u>		
	•	1	

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The date of each amendment(s) as	doption: 2/9/12
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
☐ The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.
· · · · · · · · · · · · · · · · · · ·	proved by the shareholders through voting groups. The following statement 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)
	(voting group)
The amendment(s) was/were add action was not required.	opted by the board of directors without shareholder action and shareholder
The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder action and shareholder
Dated2	9/12
Signature	Luz & Miodraji
selecte	lirector, president or other officer – if directors or officers have not been an incorporator – if in the hands of a receiver, trustee, or other court sted fiduciary by that fiduciary)
	Luz M. M. sdraji
	(Typed or printed name of person signing)
•	President
	(Title of person signing)