P120000/2722

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FEB 1 5 2012 T. LEWIS

COVER LETTER

TO: Amendment Section Division of Corporations

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NAME OF CORPORATION: CARMIL		CTIONS INC.
DOCUMENT NUMBER: P12000012	722	
The enclosed Articles of Amendment and fee are su	bmitted for filing.	•
Please return all correspondence concerning this ma	tter to the following:	
Carmichelle Lo		
Carmi Love Pro		
7027 W Browa	Firm/ Company ard Blvd. #240	
Plantation, FL	Address 33317	
	City/ State and Zip Cod	e
carmichelle.love@	gmail.com	
E-mail address: (to be us	sed for future annual report	notification)
For further information concerning this matter, pleas	se call:	
Mark Proulx, COO	at (954	,825-8044
Name of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for the following amount made	payable 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	Ameno Divisio Clifton 2661 E	Address Iment Section on of Corporations Building xecutive Center Circle

Articles of Amendment to Articles of Incorporation of FILED

12 FEB 13 PM 3: 47

CARMI LOVE PRODUCTIONS INC.

P12000012722

SECRETARY OF STATES

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

(Document Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
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)
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 in Florida, enter the name of the
new registered agent and/or the new registered office address:
Name of New Registered Agent
(F brida street address)
New Registered Office Address:, Florida, Florida
(City) (Zip Code) 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 Agent, 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 <math>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	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change Add Remove	PRES.	Carmichelle Jean Marie Yate	Plantation, FL 33317
2) Change Add Remove			
3) Change Add Remove		_	
4) : Change Add Remove		- NA	
5) Change Add Remove		-/	
6) Change Add Remove.			

attach addit	or adding additional Articles, enter change(s) here: ional sheets, if necessary). (Be specific)
<u> </u>	
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provisions t	ment provides for an exchange, reclassification, or cancellation of issued shares, for implementing the amendment if not contained in the amendment itself:
(if not a	applicable, indicate N/A)
	- IA
	NI'
	/

he date of each amendment(s) ac	Joption: 2/8/2012
ffective date if applicable:	' '
	(no more than 90 days after amendment file date)
doption 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) ifficient 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)
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
Dated 2/8/20)12
Signature	y-
selected	irector, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other court ted fiduciary by that fiduciary)
	Mark Proulx
	(Typed or printed name of person signing)
	COO
	(Title of person signing)