## P12000027755

(Requ	iestor's Name)	
(Addr	ess)	
(Addr	ess)	
(City/	State/Zip/Phone	÷#)
PICK-UP	☐ WAIT	MAIL
(Busi	ness Entity Nan	ne)
(Docu	ıment Number)	
Certified Copies	Certificates	of Status
Special Instructions to Fi	ling Officer:	





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SECRETARY OF STATE
OF CORPORATION

AUG 1 5 2012

Amend

T. BROWN

## COVER LETTER

**TO:** Amendment Section **Division of Corporations** 

Tallahassee, FL 32314

P.O. Box 6327

NAME OF CORPO	RATION: Pretty Girl	Enterprises, Inc.		
	<sub>BER:</sub> P1200002775			
	s of Amendment and fee are su			
Please return all corre	espondence concerning this ma	tter to the following:		
	Elian Raymond A	Albert		
		Name of Contact Perso	n	
	Pretty Girl Enterp		PRETTY GIRL BOOKLY	Supply
		Firm/ Company	/ /	'
	1513 South Lane	Avenue	·	
		Address		
	Jacksonville, Floi	rida 32210		
	•	City/ State and Zip Cod	le	
rav	/albert-02@hotma	il.com		
<u> </u>		sed for future annual report	notification)	
For further information	on concerning this matter, pleas	se call:		
Elian Raymo	ond Albert	<sub>at (</sub> 904	696-0011  de & Daytime Telephone Number	
Name	of Contact Person	Area Co	ode & Daytime Telephone Number	_
Enclosed is a check f	or the following amount made	payable to the Florida Dep	(904) 993-6075 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)	
	niling Address nendment Section		Address Iment Section	
	vision of Corporations		on of Corporations	
D 0	N D (00=			

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

## **Articles of Amendment Articles of Incorporation**



Pretty Girl Enterprises, Inc.

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

Document #: P12000027755

(Document Number of Corporation (if known)

nendment(s) to

NA	ame of the corporation:	
	nation "Corp," "Inc," or	tion," "company," or "incorporated" or ti "Co". A professional corporation name n 1 "P.A."
B. Enter new principal office address, if applicable:  Principal office address MUST BE A STREET ADDRESS)		1513 South Lane Avenu
		Jacksonville, Florida 322
		-
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		1513 South Lane Avenu
		Jacksonville, Florida 322
new registered agent and/or the new	w registered office addre	<del></del>
	w registered office addre Elian Raymond	d Albert
new registered agent and/or the new	Elian Raymond 1513 South La	d Albert
new registered agent and/or the new	Elian Raymond 1513 South La	d Albert ane Avenue

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	Name	<u>Addres</u> s
1) Change	VP	Jack Jacob Albert	3661 Carolina Vale
Add			Jacksonville, Florida
X Remove			32277
2) X Change	VP	George Louis Albert	5365 Oak Bay Drive
Add			North
Remove			Jacksonville, Florida 32277
3)Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
-			
Add			
Remove			

(Attach additional sheets, if necessary).	(Be specific)
ou typed my first name wrong.	It is Elian Raymond Albert, not Elain Raymond Albert
·- <u>-</u>	
If an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
(if not applicable, indicate N/A)	endment if not contained in the amendment itself:
(g vier appriouere, marcare i iii)	

The date of each amendment(s) a	adoption: 08/04/2012
Effective date if applicable: 08	3/04/2012
Elictive date it applicable.	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
☐ The amendment(s) was/were ad by the shareholders was/were s	lopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.
	oproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):
"The number of votes cas	t for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
☐ The amendment(s) was/were ad action was not required.	lopted by the board of directors without shareholder action and shareholder
The amendment(s) was/were ad action was not required.	lopted by the incorporators without shareholder action and shareholder
Dated_08/04	/2012
Signature	ian Raymond Mort
	director, president or other officer - if directors or officers have not been
	ed, by an incorporator – if in the hands of a receiver, trustee, or other court nted fiduciary by that fiduciary)
шрроп	
	Elian Raymond Albert
	(Typed or printed name of person signing)
	President
	(Title of person signing)