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### **COVER LETTER**

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: JOCELYNE'S LINGERIE PLUS INC

The enclosed Articles of Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

# JOECELYNE BENJAMIN

Name of Contact Person

# JOCELYNE'SLINGERIE PLUS INC

Firm/ Company

1710 45 ST FREE MARKET

Address

# WEST PALM BEACH FL 33407

City/ State and Zip Code

# LANATURES@LIVE.COM

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

For further information concerning this matter, please call:

## JOCELYNE BENJAMIN

,561

541-4805

Name of Contact Person

Area Code & 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

☐S43.75 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

### Articles of Amendment to Articles of Incorporation of

|  |  | SE.                     |  |
|--|--|-------------------------|--|
| (Name of Corporation as currently filed with the Florida Dept. of State)   |  |                         |  |
| JOCELYNE'S LINGERIE PLUS INC   |  |                         |  |
| (Document Number of Corporation (if known)   |  |                         |  |
| Pursuant to the provisions of section 607.1006, Florida Statutes, thi its Articles of Incorporation:   | is Florida Profit Corporation adopts the following | ig amendment()<br>ORI   |  |
| A. If amending name, enter the new name of the corporation: KATHIA & TANICIL CARGO SHIF  | PPING INC  | _The new                |  |
| name must be distinguishable and contain the word "corporat<br>"Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or<br>word "chartered," "professional association," or the abbreviation | "Co". A professional corporation name must         | bbreviation contain the |  |
| B. Enter new principal office address, if applicable:  | 1710 45 STREET                                     |                         |  |
| (Principal office address <u>MUST BE A STREET ADDRESS</u> )  | SUITE M-1 M-2                                      | -                       |  |
|  | WEST PALM BEACH FLORIDA 33407                      | _                       |  |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  | 2650 NW 64 AVE                                     |                         |  |
| <u></u>  | SUITE 214  | _                       |  |
|  | SUNRISE FLORIDA 33313                              | _                       |  |
| D. If amending the registered agent and/or registered office ad new registered agent and/or the new registered office address  |  |                         |  |
| Name of New Registered Agent   |  |                         |  |
| (Florida   | street address)                                    |                         |  |
| New Registered Office Address:   | , Florida  | _                       |  |
| (Cii   | ty) (Zip Code)                                     |                         |  |
| New Registered Agent's Signature, if changing Registered Age<br>I hereby accept the appointment as registered agent. I am familia  | r with and accept the obligations of the position. |                         |  |
| Signature of New Registered  | d 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 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           | <u>PT</u>                | John Doe          |                  |
|----------------------------|--------------------------|-------------------|------------------|
| X Remove                   | $\underline{\mathbf{V}}$ | Mike Jones        |                  |
| X Add                      | <u>sv</u>                | Sally Smith       |                  |
| Type of Action (Check One) | Title                    | Name              | <u>Addres</u> s  |
| 1) Change                  | PR                       | JOCELINE BENJAMIN | 2650 NW 64 AVE   |
| X Add                      |                          |                   | APT 214          |
| Remove                     |                          |                   | SUNRISE FL 33313 |
| 2) Change                  |                          |                   |                  |
| Add                        |                          |                   |                  |
| Remove                     |                          |                   |                  |
| 3) Change                  |                          |                   |                  |
| Add                        |                          |                   |                  |
| Remove                     |                          |                   |                  |
| 4) Change                  |                          |                   |                  |
| Add                        |                          |                   |                  |
| Remove                     |                          |                   |                  |
| 5) Change                  | <u></u>                  |                   |                  |
| Add                        |                          |                   |                  |
| Remove                     |                          |                   |                  |
| () (I                      |                          |                   |                  |
| 6) Change                  |                          |                   |                  |
| Add                        |                          |                   | <del></del>      |
| Remove                     |                          |                   |                  |

| icles, enter change(s) here: (Be specific)                 |
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| hange, reclassification, or cancellation of issued shares, |
| endment if not contained in the amendment itself:          |
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| The date of each amendment(s) addate this document was signed.   | loption: 9/9/13  | , if other than the |
|--|--|---------------------|
| Effective date if applicable:                                    | <b>,</b> .   |                     |
|  | (no more than 90 days after amendment file date)   | www.witer           |
| Adoption of Amendment(s)   | ( <u>CHECK ONE</u> )   |                     |
| ☐ The amendment(s) was/were ado by the shareholders was/were sur | pted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.   |                     |
|  | roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):  |                     |
|  | for the amendment(s) was/were sufficient for approval  |                     |
| by   | (voting group)   |                     |
| •  | (voting group)   | ·                   |
| The amendment(s) was/were ado action was not required.           | pted by the board of directors without shareholder action and shareholder  |                     |
| ■ The amendment(s) was/were adopaction was not required.         | pted by the incorporators without shareholder action and shareholder   |                     |
| Dated 09/09  | <del>1/2013</del>  |                     |
| Signature /  | to   |                     |
| ( <b>By</b> a di<br>selected                                     | rector, president or other officer – if directors or officers have not been l, by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary) | _                   |
| ,  | JOCELYNE BENJAMIN  |                     |
| -  | (Typed or printed name of person signing)  | _                   |

**PRESIDENT** 

(Title of person signing)