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R. WHITE

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	TION: AMERICAN STYL	LE INC		
DOCUMENT NUMBE	R: P12000051430			
	Amendment and fee are sub	omitted for filing.		
Please return all correspo	ondence concerning this mat	ter to the following:		
SI	LVIA R. NAVARRETE			
_	· · · · · · · · · · · · · · · · · · ·	Name of Contact Person		
А	MERICAN STYLE INC			
<u></u>		Firm/Company		
79	900 OAK LANE SUITE 400	Firm/ Company		
		Address		
M	MIAMI, LAKES, FLORIDA 33016			
	indivii, Dates, i boriba	<u> </u>		
		City/ State and Zip Code		
SALES	@GLOBALBUSINESSTEC			
	E-mail address: (to be us	ed for future annual report	notification)	
	concerning this matter, pleas			
SILVIA R. NAVARRETE		at (_) 6648350	
Name of Contact Person		Area Coo	de & Daytime Telephone Number	
Enclosed is a check for t	he following amount made p	payable to the Florida Depa	rtment 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)	
Amen Divisi P.O. E	ng Address dment Section on of Corporations tox 6327 assee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle ussee, FL 32301	

Articles of Amendment to . Articles of Incorporation of

FILED

AMERICAN STYLE INC	15 OCT 2% AH 10: 41		
(Name of Corporation as current	tly filed with the Florida Dept. of State)		
P12000051430	TALLAUASSEE FUR SA		
(Document Number	of Corporation (if known)		
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s)		
A. If amending name, enter the new name of the corporation:			
	The new		
name must be distinguishable and contain the word "corporati "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must contain the		
B. Enter new principal office address, if applicable:	7900 OAK LANE SUITE 400		
(Principal office address MUST BE A STREET ADDRESS)	MIAMI LAKES, FLORIDA 33016		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	7900 OAK LANE SUITE 400		
(MIAMI LAKES, FLORIDA 33016		
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address			
Name of New Registered Agent			
(Florida s	treet address)		
New Registered Office Address: 7900 OAK LANE SUITE	E 400, MIAMI LAKES, Florida		
	(City) (Zip Code)		
ivew Registered Office Address.			
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familiar			
t nervoy accept the appointment as registered agent. I am jamittar	min and accept the conganoth 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 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.

X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
i) Change			
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change		_	
Add			
Remove			
6) Change			
Add			
Remove			

	l sheets, if necessary).	. (Be specific)			
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an amendmen	nt provides for an exc	change, reclassifi	cation, or cancellatio	n of issued shares.	
provisions for i	implementing the am icable, indicate N/A)	<u>iendment if not co</u>	ontained in the amen	dment itself:	
(if not appl	icable, maicale (VA)				
(if not appli					
(if not appl					
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The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendme	nt file date)
Note: If the date inserted in this block does not meet the applicable statutory filing r document's effective date on the Department of State's records.	equirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast by the shareholders was/were sufficient for approval.	for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. T must be separately provided for each voting group entitled to vote separately on the	he following statement amendment(s):
"The number of votes cast for the amendment(s) was/were sufficient for approv	ral
by	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder a action was not required.	ction and shareholder
☐ The amendment(s) was/were adopted by the incorporators without shareholder action action was not required.	and shareholder
OCTOBER 8TH. 2015	
Signature M www.t	
(By a director, president or other officer - if directors or off	
selected, by an incorporator — if in the hands of a receiver, tappointed fiduciary by that fiduciary)	rustee, or other court
SILVIA R NAVARRETE	
(Typed or printed name of person signing	g)
PRESIDENT & DIRECTOR	
(Title of person signing)	