## 012000053208

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	Certificates	s of Status
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	RATION: CHIC BOU BER: P1200005320	TIQUE CONSIG 8	INMENT INC.
The enclosed Articles	of Amendment and fee are su	bmitted for filing,	
Please return all corre	spondence concerning this mat	tter to the following:	
	PETER J. KOLOS	SVARY	
		Name of Contact Person	1
		Firm/ Company	
	6549 SOMERSE	T DRIVE #205J	
		Address	
	BOCA RATON, F	L. 33433	
		City/ State and Zip Code	e
For further informatio	E-mail address: (to be us	sed for future annual report	notification)
PETER J. KO	OLOSVARY	<sub>at (</sub> 412	_) 400-8400
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	or the following amount made p	payable to the Florida Depa	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)
Am Div P.O	iling Address endment Section ision of Corporations . Box 6327	Amend Divisio Clifton	Address Iment Section on of Corporations Building xecutive Center Circle

Tallahassee, FL 32301

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

to		
to Articles of Inco	orporation	· ·
of	p	12.5°
CHIC BOUTIQUE CONSIGNMENT INC.		8
(Name of Corporation as currently filed with the Fl	orida Dept. of State)	
P12000053208		29
(Document Number of Corporation (if	known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>I</i> its Articles of Incorporation:	Florida Profit Corporation adopts	the following amendment(s) to
·		· · · <del>- 1</del> 1
A. If amending name, enter the new name of the corporation:		
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Coword "chartered," "professional association," or the abbreviation "Inc."	Co". A professional corporation	
B. Enter new principal office address, if applicable:	6315 N. FEDERAL	. HWY
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	BOCA RATON, FL.	33487
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	6315 N. FEDERAL	. HWY
. (	BOCA RATON, FL.	33487
D. If amending the registered agent and/or registered office address:  new registered agent and/or the new registered office address:		the
Name of New Registered Agent		
(Florida stre	eet address)	
New Registered Office Address:	, Florida	
(City)	(	Zip Code)
New Registered Agent's Signature, if changing Registered Agent:  I hereby accept the appointment as registered agent. I am familiar w		he position.
Signature of New Registered A	gent, 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: X Change	<u>PT</u>	John Do	<u>e</u>	
X Remove	<u>v</u>	Mike Jos	<u>nes</u>	
X Add	<u>sv</u>	Sally Sm	<u>iith</u>	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) Change				
Add				
Remove				
2) Change				
Add		_		
Remove				
3) Change		_		
Add				-
Remove				
4) Change				
Add		<del>-</del>		
Remove				
5) Change		_		
Add				,
Remove				
6) Change		_		
Add				
Remove				

attach additional sheets, if necessary).	(Be specific)
<del></del>	
an amendment provides for an exchi	nange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:
(if not applicable, indicate $N/A$ )	nament if not contained in the amendment asett.
(i) not approvate, material many	

The date of each amendment(s) adoption: 10/09/2012
Effective date if applicable:
(no more than 90 days after amendment file date)
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for 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 adopted by the board of directors without shareholder action and shareholder action was not required.
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.
Dated_10/09/2012
Signature  (By a director, president or other officer – if directors of officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
PETER J. KOLOSVARY
(Typed or printed name of person signing)
PRESIDENT
(Title of person signing)