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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPOR	ATION: CASTILLO	OF STYLE, INC	
DOCUMENT NUMBER: P12000076988			
The enclosed Articles	of Amendment and fee are sub	mitted for filing.	
Please return all corres	pondence concerning this matt	er to the following:	
	YILDA M ,CASTIL	LO	
•		Name of Contact Person	
	CASTILLO OF ST	YLE, INC	
•		Firm/ Company	
	955 W LANCAST	ER RD	
		Address	
	ORLANDO, FL 32		
		City/ State and Zip Code	
yilc	as24@yahoo.com		
	E-mail address: (to be use	ed for future annual report	notification)
For further information	n concerning this matter, please	e call:	
YILDA M , CASTILLO		5417685	
Name of Contact Person		Area Co	de & Daytime Telephone Number
Enclosed is a check fo	r the 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)
Amo Divi P.O	iling Address endment Section ision of Corporations Box 6327 ahassee, 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

CASTILLO OF STYLE, INC.

(Name of Corporation as	currently filed with the	Florida Dept. of St	ate)	
P12000076988				
(Documer	t Number of Corporation	(if known)		_
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, th	is <i>Florida Profit Cor</i>	rporation adopts the following	ng amendment(s) to
A. If amending name, enter the new na	me of the corporation:			
N/A				The new
name must be distinguishable and com "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp," "Inc," oi	"Co". A professio	or "incorporated" or the a nal corporation name must	bbreviation
B. Enter new principal office address, (Principal office address MUST BE A S		N/A		_
C. Enter new mailing address, if appli (Mailing address <u>MAY BE A POST</u> (N/A		-
D. If amount in a the constant of the second	1/ 1 60			-
D. If amending the registered agent an new registered agent and/or the nev			ter the name of the	
Name of New Registered Agent	DISNEYDI SO	SA		
	2390 W OAKF	RIDGE RD		•
	(Florida	street address)		
New Registered Office Address:	ORLANDO		, Florida_32809	
	(Ci	ty)	(Zip Code)	-
New Registered Agent's Signature if a	hanging Degistered Age	nt.		
New Registered Agent's Signature, if c			e obligations of the position.	

Page 1 of 4

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	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	Р	CASTILLO, YILDA M	2210 YANKEE PL APT 323
Add			ORLANDO, FL 32839
X Remove		·	
2) Change	VP	CASTILLO, JOSE M	2210 YANKEE PL APT 323
Add			ORLANDO, FL 32839
X Remove			
3) Change	P	SOLIVAN, ROSSIO	2390 W OAKRIDGE RD
X Add			ORLANDO FL 32809
Remove			
4) Change	VP	SOSA, DISNEYDI	2390 W OAKRIDGE RD
X Add	- 1.		ORLANDO FL 32809
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			
remove			

1/4	s, if necessary).	icles, enter change(s) here: (Be specific)
I/A	• •	
		
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If an amendment prov	ides for an eych	nange reclassification or cancellation of issued chares
provisions for implem	<u>tenting the ame</u>	nange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:
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The date of each amendment(s) adoption: U//U1/2013
Effective date if applicable: 07/01/2013
(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 07/01/2013
Signature
(By a director, president or other officer - if directors or officers have not been
selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
YILDA M ,CASTILLO
(Typed or printed name of person signing)
PRESIDENT
(Title of person signing)