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OCT 0 2 2012 T. ROBERTS

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORAT	ION: LADY	FRESH	ENTO	ethnment]	[NC
DOCUMENT NUMBER:	P12000	0071428			
The enclosed Articles of A	mendment and fee are su	abmitted for filing.			
Please return all correspond	lence concerning this ma	itter to the followin	ig:		
	1.1.			0.4.	
	Name F. CALLIARDSON CPA Name of Contact Person Act Accountang + TAX Inc Firm/ Company				
	Ar Armin		, T.,	_	
	The Media	Firm/ Com	امرات مر npany	<u> </u>	
13746 N. NEBERSKA AUGUE Address IAMPA, FL 33613 City/ State and Zip Code					
		Addres	SS		
	IAMPA,	الم الم	3361	3	
		City/ State and	Zip Code	:	
WE	Richardsonega	Qaol eom	١		
	E-mail address: (to be us	sed for future annu	al report	notification)	
For further information con					
Waine F. S	ichardsen intact Person	at (%	713	374-2409	
Name of Co	ntact Person		Area Coc	le & Daytime Telepho	ne Number
Enclosed is a check for the					
.				-	
98. \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Certified Cop		☐\$52.50 Filing Fee Certificate of State	
		(Additional co		Certified Copy	
		enclosed)		(Additional Copy	
				is enclosed)	
Mailing Address Street Address					
Amendment Section Amendment Section					
	of Corporations	Division of Corporations			
	P.O. Box 6327 Clifton Building				
Tallahassee, FL 32314 2661 Executive Center Circle				1	
	Tallahassee, FL 32301				

to Articles of Incorporation of Name of Corporation as currently filed with the Florida Dept. of State) 0000 77428 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: (Zip Code) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Articles of Amendment

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.

Example: X Change	<u>PT</u>	John Doc	
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		N/A-	
Add			
Remove			<u> </u>
2) Change			
Add		·	
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

ach additional sheets, if necessary).	(Be specific)
N/A	
<u></u>	
n amandment provides for an avel	hange, reclassification, or cancellation of issued shares.
ovisions for implementing the ame	endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
n/A	
11/P	
<i>T</i>	
,	
•	
,	
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The date of each amendment(s) adop	otion:	9	12/	12
Effective date if applicable:		91	12/1	2
	(no more	than 90 de	ys dfie	er amendment file date)
Adoption of Amendment(s)	(<u>CHECK ONE</u>	9		
The amendment(s) was/were adopted by the shareholders was/were suffice	ed by the shareholder cient for approval.	rs. The nu	mber o	of votes cast for the amendment(s)
☐ The amendment(s) was/were appromust be separately provided for ea	ved by the sharehold ch voting group enti	ers through	n votin e separ	g groups. The following statement rately on the amendment(s):
"The number of votes east for	the amendment(s) w	vas/were st	ıfficier	nt for approval
by	(voting group)			
	(voting group)			
The amendment(s) was/were adopte action was not required.	·			
The amendment(s) was/were adopte action was not required.	ed by the incorporate	ors without	sharet	holder action and shareholder
Dated G	1/85/12.			
Signature	7-M. 9	Hem	»ł	
selected, l		if in the ha		ectors or officers have not been a receiver, trustee, or other court
_	TIERRA		AKKI.	S erson signing)
	(Typed or p	rinted nam	ne of po	erson signing)
		COLOFN	<u>7. </u>	
	(Title of	person sig	ning)	