## P120000 82123

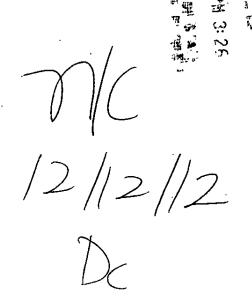
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	RATION: KATHY'S F	LOWERS SOLU	JTIONS CORP		
DOCUMENT NUMBER: P12000082123					
The enclosed Articles	The enclosed Articles of Amendment and fee are submitted for filing.				
	espondence concerning this ma	•			
r lease return an corre	spondence concerning this ma	tter to the following.			
•	KATHRYN J. VE	LEZ			
		Name of Contact Person	•		
INTERNATIONAL FLOWERS OF THE WORLD, INC					
		Firm/ Company	_		
18103 PRINCESS POINT CIRCLE					
	Address				
	TAMPA FL. 3364				
		City/ State and Zip Code			
	E-mail address: (to be us	sed for future annual report	notification)		
For further information concerning this matter, please call:					
KATHRYN J. VELEZ at (813 ) 541-4744			541-4744		
Name	of Contact Person		de & 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	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
	iling Address		Address		
	endment Section ision of Corporations	Amendment Section Division of Corporations			
P.O	. Box 6327	Clifton	Building		
Tallahassee, FL 32314 2661 Executive Center Circle					

## Articles of Amendment Articles of Incorporation of

## KATHY'S FLOWERS SOLUTIONS, CORP.

(Name of Corporation as currently filed with the Florida Dept. of State)

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(Document Number	of Corporation (if known)		5
ursuant to the provisions of section 607.1006, Flor Articles of Incorporation:	rida Statutes, this <i>Florida Profit</i> (	Corporation adopts the following	ameno
If amending name, enter the new name of the		c	
ime must be distinguishable and contain the w Corp.," "Inc.," or Co.," or the designation "Co ord "chartered," "professional association," or t	vord "corporation," "company, orp," "Inc," or "Co". A profes.	" or "incorporated" or the abb	The r breviat ontain
Enter new principal office address, if application in the second			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE I	B <i>OX</i> )		
If amending the registered agent and/or regis		enter the name of the	
new registered agent and/or the new registere	ed office address:		•
Name of New Registered Agent			
	(Florida street address)	<del> </del>	
New Registered Office Address:		, Florida	
	(City)	(Zip Code)	
w Registered Agent's Signature, if changing Rereby accept the appointment as registered agent		the obligations of the position.	
53	Now Braintaged Asset Salamai		

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:		oning or an arrange	
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)	Title	Name	<u>Address</u>
1)Change			
Add			
Remove	•		
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
ර) Change			
Add			
Remove			

. If amending or adding additional Arti	cles, enter change	s) here:		
(Attach additional sheets, if necessary).	(Be specific)			
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If an amendment provides for an excha	nge, reclassification	on, or cancellati	on of issued share	<u>5.</u>
provisions for implementing the amen (if not applicable, indicate N/A)	dment if not conta	ined in the ame	ndment itself:	
(\$ 1100 - P.P. 1100 - 1100 (1100)				
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The date of each amendment(s) adoption: NOVEMBER 12,2012
Effective date if applicable: DECEMBER 1,2012
(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
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 NOVEMBER 27,2012
Signature Am Classical 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)
KATHRYN J. VELEZ
(Typed or printed name of person signing)
PRESIDENT
(Title of person signing)