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SECRETARY OF STATE
FALLAHASSEE BLOOMS

COVER LETTER

TO: Amendment Section Division of Corporations

One Sten	Channing (Contor Inc
NAME OF CORPORATION: One Stop Shopping Center, Inc.		
DOCUMENT NUMBER: P13000003	142	
The enclosed Articles of Amendment and fee are sub	mitted for filing.	
Please return all correspondence concerning this matte	er to the following:	
Ma	ria Philoger	ne
	(Name of Contact Person	
One Stop	Shopping C	Center, Inc.
	(Firm/ Company)	
10	125 Malpas	Pt
	(Address)	
Orla	ando, FL 32	832
	(City/ State and Zip Cod	e)
mphilogene123@hotmail.com		
E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please	call:	
Maria Philogene	_{at (} 407	601-3560 ode & Daytime Telephone Number)
(Name of Contact Person)	(Area Co	ode & 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)
Mailing Address		Address
Amendment Section Division of Corporations		Iment Section on Corporations
P.O. Box 6327	Clifton	Building
Tallahassee, FL 32314	2661 E	xecutive Center Circle

Tallahassee, FL 32301

Articles of Amendment

FILED

Articles of Incorporation 13 of

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One	e Stop Shopping	Centerelinary of STATE	
(Name of Corporation as currently file			
	P130000031	142.	
(Document Nur	mber of Corporation (if kno	wn)	
Pursuant to the provisions of section 617.1006, amendment(s) to its Articles of Incorporation:	, Florida Statutes, this <i>Flori</i>	da Not For Profit Corporation adopts the f	ollowing
A. If amending name, enter the new name o	f the corporation:		
			The new
name must be distinguishable and contain the "Company" or "Co." may not be used in the s		corporated" or the abbreviation "Corp." o	r "Inc."
B. Enter new principal office address, if app	plicable:		
(Principal office address <u>MUST BE A STREE</u>			
			
	·		
C. Enter new mailing address, if applicable			
(Mailing address <u>MAY BE A POST OFFI</u>	<u> (CE BOX</u>)		

D. If amending the registered agent and/or new registered agent and/or the new reg		n Florida, enter the name of the	
	iotered office address.		
Name of New Registered Agent:			
<u> </u>			
New Registered Office Address: (Florida street address)		adaress)	
		F1 1	
	(City)	, Florida (Zip Code)	
	•		
New Registered Agent's Signature, if changi I hereby accept the appointment as registered		and accept the obligations of the position	
The second secon	G		

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 X Remove X Add	PT John D V Mike Jo SV Sally S		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	PST	Maria Philogene	10125 Malpas Pt.
X Add			Orlando, FL 32832
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Ε.	E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)			
		<u></u>		

The date of each amendmer	February 1, 2013
Effective date <u>if applicable</u> :	February 1, 2013
mappicusie.	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
The amendment(s) was/was/were sufficient for a	were adopted by the members and the number of votes cast for the amendment(s) approval.
☐ There are no members o adopted by the board of	r members entitled to vote on the amendment(s). The amendment(s) was/were directors.
Dated	3/29/13 Vi
(By the have	e chairman or vice chairman of the board, president or other officer-if directors not been selected, by an incorporator – if in the hands of a receiver, trustee, or court appointed fiduciary by that fiduciary)
Maria	Philogene
	(Typed or printed name of person signing)
Incorpo	rator, Sole Shareholder & Chairman of the Board
·	(Title of person signing)