P13000029256

(Re	equestor's Name))		
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Cali Chic DOCUMENT NUMBER: P130000292	Boutique, Inc. 256	
The enclosed Articles of Amendment and fee are su	bmitted for filing.	
Please return all correspondence concerning this man	tter to the following:	
Lee Anne LeBI	<u>`</u>	
Law Office of L	Name of Contact Persor	
1835 E. Hallan	Firm/ Company dale Beach B	lvd. #344
Hallandale, FL	Address 33009	
	City/ State and Zip Code	•
lal@theleblancfirn	n.com	
	sed for future annual report	notification)
For further information concerning this matter, pleas	se call:	
Lee Anne LeBlanc	_{at (} 954	646-1175
Name of Contact Person		de & Daytime Telephone Number
Enclosed is a check for the following amount made	payable to the Florida Depa	ertment of State:
■ \$35 Filing Fee	□\$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

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address
Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Call Chic Boutique, Inc.	•			
(Name of Corporation as curr	rently filed with the Flor	ida Dept. of State)	-	
P13000029256				
(Document Nu	mber of Corporation (if kr	nown)		
Pursuant to the provisions of section 607,1006 its Articles of Incorporation:	, Florida Statutes, this Flo	orida Profit Corporation adop	ots the following a	mendment(s) to
A. If amending name, enter the new name of	of the corporation:			
Ca Va Chic Boutique, In				he new
name must be distinguishable and contain "Corp.," "Inc.," or Co.," or the designation word "chartered," "professional association,	" "Corp," "Inc," or "Co	". A professional corporation	ited" or the abb on name must co	reviation ntain the
B. Enter new principal office address, if ap	mlicable.	N/A		
(Principal office address MUST BE A STREET	ET ADDRESS)			
				•
				
C. Enter new mailing address, if applicable	p.	NI/A		
(Mailing address MAY BE A POST OFF		N/A		
				是一個工
	•			23
				7 AND
D. If amending the registered agent and/or		s in Florida, enter the name	of the	THE PROPERTY OF A PH ST. 19
new registered agent and/or the new reg	<u>-</u>			
Name of New Registered Agent	Α			
	(Florida street	address)		
New Registered Office Address: N	/A	, Florida		
	(City)		(Zip Code)	
New Registered Agent's Signature, if chang I hereby accept the appointment as registered	zing Kegistered Agent: Lagent. Lam familiar with	h and accept the obligations o	of the position.	
,,	•	, 5		
Signati	ure of New Registered Age	ent, 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>se</u>	
X Remove	<u>v</u>	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	nith	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change		_	N/A	
Add				
Remove				
2) Change		_		
Add				
Remove				
3) Change				
Add				
Remove				
4) Change		-		
Add				
Remove				
5) Change				
Add				
Remove				
6) Change		_		
Add	-			
Remove				

L. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)					
'A	(
	· · · · · · · · · · · · · · · · · · ·	 			
	 -,				
			·····		
_					
					
If an amendment provides for an exc provisions for implementing the am (if not applicable, indicate N/A)	hange, reclassification endment if not conta	on, or cancellation c ined in the amenda	of issued shares, eent itself:		
		<u> </u>			
		·····			
				·,	

The date of each amendment(s) adoption: date this document was signed.	, if other than the
NIA	
Effective date if applicable: N/A (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_1/14/2014 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)	
Christina M. Rotondi	
(Typed or printed name of person signing)	
President	·
(Title of person signing)	