P13000080975

(Requestor's Name)
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TO: Amendment Section Division of Corporations

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Division of Cor	potations	,		
NAME OF CORPO	PRATION: Monsieur Touton	Selections (FL), Inc.		
DOCUMENT NUN	IBER: P13000080975	<u> </u>		
The enclosed Article	s of Amendment and fee are su	bmitted for filing.		
Please return all corr	espondence concerning this ma	tter to the following:		
	Kelly Meadows	. ,		
		Name of Contact Person	1	
	GrayRobinson, P.A.	·		
	· · · · · · · · · · · · · · · · · · ·	Firnt/Company		
	301 S Bronough St., Suite	600		
	oor o bronough ot., oute	Address		
	Tallahaanaa El 20204			
	Tallahassee, FL 32301	City/ State and Zip Code		
		City/ State and Zip Cod		
	Ann@mtouton.com	[
		ed for future annual report	notification)	
For further informati	on concerning this matter, pleas	se call:		
Kelly Meadows		at (850) 577-6957	
Name	of Contact Person		de & Daytime Telephone Number	
Enclosed is a check f	or the following amount made	payable to the Florida Depa	artment of State:	
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
	niling Address		Address	
Amendment Section Division of Corporations			Amendment Section Division of Corporations	
P.O. Box 6327			entre of Tallahassee	
Tal	llahassee, FL 32314		N. Monroe Street, Suite 810	
		Tallaha	ssee, FL 32303	

Articles of Amendment to Articles of Incorporation of

(Name of Corporation as cur	rently filed with the Flor	ida Dept. of State)	
P13000080975		,	
	er of Corporation (if know	wn)	
Pursuant to the provisions of section 607.1006, Florida Statutes, its Articles of Incorporation:	this Florida Profit Corpo	ration adopts the following	g amendment(s) t
A. If amending name, enter the new name of the corporation	<u>n':</u>		
N/A			The new
name must be distinguishable and contain the word "corporation "Inc.," or Co.," or the designation "Corp," "Inc," or "Co "chartered," "professional association," or the abbreviation "I	". A professional corpo		
B. Enter new principal office address, if applicable:	N/A		20 A
(Principal office address MUST BE A STREET ADDRESS)			72 ·
	· · · · · · · · · · · · · · · · · · ·		<u>.</u>
			7
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A		
		그는 'p' . : '	<u>6</u>
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office add Name of New Registered Agent N/A		the name of the	
(Florid	la street address)		
New Registered Office Address:		. Florida	
Mest negatived vijite maaress.	(City)	(Zip C	ode)
New Registered Agent's Signature, if changing Registered As I hereby accept the appointment as registered agent. I am famil		oligations of the position.	
N/A			
	ew Registered Agent, if ch	anging	
Check if applicable			

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	S	Ann-Marie Fitzgerald	129 West 27th St, 9th Floor
X Add			New York, NY 10001
Remove			
2) Change	s	Constance Oehmler	129 West 27th St., 9th Floor
Add			New York, NY 10001
X Remove 3) Change			2020 APR
Add			
Remove			5
4) Change			AH 7:
Add			25
Remove			
5) Change			
Add		1	
Remove		'	
6) Change		_	
Add			
Remove			

E. If amending or adding additional Articles, enter cha (Attach additional sheets, if necessary). (Be specific)	nge(s) here:	
N/A		
		<u> </u>
	<u> </u>	
		.
		
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	'	. 10
		2000 AFR
		
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		1.7
		
	<u> </u>	
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F. If an amendment provides for an exchange, reclassif	ication, or cancellation of issued shares,	
provisions for implementing the amendment if not (if not applicable, indicate N/A)	contained in the amendment itself:	
N/A		
		
	· · ·	· · · -
	ı	
		

The date of each amendment(s) adopt late this document was signed.	ion:		, if other than the
date this document was signed.			
Effective date <u>if applicable</u> :	ino more tha	n 90 days after amendment file date)	
		'	
Note: If the date inserted in this block document's effective date on the Depart	does not meet the apment of State's record	plicable statutory filing requirements, this date will r s. 	tot be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)		
★ The amendment(s) was/were adopted action was not required.	I by the incorporators,	or board of directors without shareholder action and s	hareholder
☐ The amendment(s) was/were adopted by the shareholders was/were suffice	I by the shareholders. ient for approval.	The number of votes cast for the amendment(s)	7020 APR
☐ The amendment(s) was/were approvemust be separately provided for each	ed by the shareholders h voting group entitled	through voting groups. The following statement to vote separately on the amendment(s):	APR 15
"The number of votes cast for	the amendment(s) was	were sufficient for approval	
by		<u>1 :</u>	= 1
	(voting group)		:: 25 51
Dated	/2026		
Signature	m Marie	Filo chate	_
(By a direc	tor, president or other	officer if directors or officers have not been in the hands of a receiver, trustee, or other court	
appointed	fiduciary by that fiduci	ary)	
	ANN MARIE	F1 + 20-7 m Id	
	(Typed or prin	ned name of person signing)	
	Secretary	1-1	
	(Title of perso	n signing)	
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		()	
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