P/3000087253

(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates o	f Status
Special Instructions to	Filing Officer:	
	Office Use Only	Y



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FLORIDA DEPARTMENT OF STATE Division of Corporations

December 16, 2014

ASTRID Y LOZADA SUNGLASSES M & A, INC 10754 NW 85 TERRACE, APT#8 DORAL, FL 33178

SUBJECT: SUNGLASSES M & A, INC

Ref. Number: P13000087253

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Darlene Connell Regulatory Specialist III

Letter Number: 514A00026620



FLORIDA DEPARTMENT OF STATE Division of Corporations

October 23, 2014

ASTRID Y LOZADA SUNGLASSES M & A, INC 10754 NW 85 TERRACE, APT#8 DORAL, FL 33178

SUBJECT: SUNGLASSES M & A, INC

Ref. Number: P13000087253

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

If the corporation is a **PROFIT** corporation it must be signed 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.

If the corporation is a **NOT FOR PROFIT** corporation it must be signed by the chairman or vice chairman of the board, president or other officer - if directors have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

PLEASE CHECK ONLY ONE BOX IN THE ADOPTION OF AMENDMENT LOCATED ON PAGE 4 OF 4 OF THE DOCUEMNT.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Darlene Connell Regulatory Specialist III

Letter Number: 114A00022705

Division of Comparations, D.O. DOV 6227 Tallahagas, Florida 2221

COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: SUNGLASSES M & A, INC P13000087253 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: ASTRID Y LOZADA Name of Contact Person SUNGLASSES M & A, INC Firm/ Company 10754 NW 85 TERRACE. APT#8 Address **DORAL. FL 33178** City/ State and Zip Code CESAR@ATEACCOUNTING.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: ASTRID Y LOZADA Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: □\$43.75 Filing Fee & □\$52.50 Filing Fee □\$43.75 Filing Fee & ■ \$35 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy (Additional Copy 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

is enclosed)

Articles of Amendment Articles of Incorporation

FILED 15 FEB 11 PM 3: 03

SUNGLASSES M & A, INC

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

P13000087253

(Document Number of Corporation (if known)

name must be distinguishable and contain the word "corporation," "company," or "incorporat "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporatio	ted" or the abbreviation
word "chartered," "professional association," or the abbreviation "P.A."	n name must contain t
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 new registered agent and/or the new registered office address:	of the
Name of New Registered Agent N/A	
(Florida street address)	
New Registered Office Address: N/A	

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.

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	<u>Name</u>	<u>Addres</u> s
1) Change		N/A	
Add			
Remove			
2) Change		N/A	
Add			
Remove			
3) Change		N/A	
Add			
Remove			
4) Change		N/A	
Add			····
Remove			
5) Change		N/A	
Add			
Remove			
6) Change		N/A	
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Pamaua			

Α	heets, if necessary).					
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16				D.42 . C.		
provisions for im	provides for an exc plementing the am	endment if no	t contained in	the amendmen	ssueu snares, it itself:	
(if not applica	ble, indicate N/A)					
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The date of each amendment(s) adoption:	_, if other than the
date this document was signed.	
Effective date if applicable:	<u> </u>
(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	
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)	
(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_10/9/14	
Dated O O O O	
Signature total Jorada.	
(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)	
ASTRID Y LOZADA	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	