P1400000aa05

. (Red	questor's Name)	
(Add	dress)	
(Add	dress)	
(City	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bus	siness Entity Nar	ne)
(Doc	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to F	Filing Officer:	
:		

Office Use Only



500261742065

08/11/14--01013--008 **35.00

SHORETAKY OF STATE

C. LEWIS

AUG 1 9 2014

EXAMINER

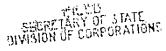
TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Flowers and Gift by Valentina Corp (Name of Corporation)
DOCUMENT NUMBER: P14000002205
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
Yen. Ramos Ramirez (Name of Person)
Flowers and Gifts by Valentine Corp (Name of Firm/Company)
3590 Coral Way Step2
Miami FL 33145
(City/State and Zip Code) For further information concerning this matter, please call:
Ven 1 Rame 5 (Name of Person) at (305) 446-7343 (Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 made payable to the Florida Department of State.

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

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

Articles of Amendment to Articles of Incorporation of



FLOWERS AND GIFTS BY VALENTINA CORP

14 AUG 11 PM 3: 45

(Name of Corporation as	s currently filed with the	Florida Dept. of State)		
P14000002205		,		
(Documer	nt Number of Corporation	(if known)		
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, th	is <i>Florida Profit Corporati</i>	on adopts the following	g amendment(s) to
A. If amending name, enter the new na	ame of the corporation:			
name must be distinguishable and cont "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	nation "Corp," "Inc," or	"Co". A professional co	corporated" or the ab rporation name must c	The new breviation ontain the
B. Enter new principal office address, (Principal office address MUST BE A S				
C. Enter new mailing address, if appli (Mailing address MAY BE A POST of				
D. If amending the registered agent an new registered agent and/or the new	id/or registered office ad w registered office addre	ldress in Florida, enter the	e name of the	
Name of New Registered Agent	YENI RAMOS			
	3590 CORAL	WAY SUITE 102	2	
	•	street address)		
New Registered Office Address:	MIAMI		orida 33145	
	(Ci	(y)	(Zip Code)	
New Registered Agent's Signature, if cl I hereby accept the appointment as regist	tered agent. I am familia	nt: r with and accept the obliga d Agent, if changing	ations of the position.	

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 Do	<u>e</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	VP,S	<u> </u>	NANCY GALLOSO	3590 CORAL WAY
Add				SUITE 102
Remove				MIAMI FL 33145
2) Change	P,S,[2	YENI RAMOS RAMIREZ	3590 CORAL WAY
Add				SUITE 102
Remove				MIAMI FL 33145
3) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add		_		
Remove				
				
6) Change		_	_	
Add				·····
Remove				

	(Be specific)
If an amendment provides for an exch	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
(if not applicable, indicate N/A)	

The date of each amendment(s) adoption:	SASTE TARY OF STATE	, if other than the
date this document was signed.	OINTSION OF LERPORALISM	
Effective date <u>if applicable</u> :	16 AUG 11 PH 3: 45	
(no more th	aan 90 days after amendment file date)	
Adoption of Amendment(s) (CHECK ONE)		
The amendment(s) was/were adopted by the shareholders. by the shareholders was/were sufficient for approval.	The number of votes cast for the amendment(s)	
The amendment(s) was/were approved by the shareholders must be separately provided for each voting group entitle.		
"The number of votes cast for the amendment(s) was	s/were sufficient for approval	
by	21	
(voting group)		
The amendment(s) was/were adopted by the board of direct action was not required.	ctors without shareholder action and shareholder	
The amendment(s) was/were adopted by the incorporators action was not required.	without shareholder action and shareholder	
Dated 7/26/14		
Dated 7/26/14 Signature Von Poncy		
(By a director, president or other selected, by an incorporator – if:	officer – if directors or officers have not been in the hands of a receiver, trustee, or other court	
appointed fiduciary by that fiduc	••	
_ Yeni	Ramos Ramivez I or printed name of person signing)	
Presi	dent	
	(Title of person signing)	