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Division of Corporations Electronic Filing Cover Sheet

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(((H14000054345 3)))



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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : BLUMBERG/EXCELSIOR CORPORATE SERVICES, INC.

Account Number: 075350000353 Phone : (800)221-2972 Fax Number : (888)692-9256

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email	Address:		 	

COR AMND/RESTATE/CORRECT OR O/D RESIGN VIKKI LOMATTA COSMETICS OF FLORIDA INC

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From:

03/06/2014 12:01

#661 P.002/006

850-617-6381

3/6/2014 11:55:52 AM PAGE 1/001 Fax Server



March 6, 2014

FLORIDA DEPARTMENT OF STATE

VIKKI LOMATTA COSMETICS OF FLORIDA INC 11065 CANARY ISLAND CT. PLANTATION, FL 33324

SUBJECT: VIKKI LOMATTA COSMETICS OF FLORIDA INC

REF: P14000020040

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

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.

Tracy L Lemieux Regulatory Specialist II FAX Aud. #: B14000054345 Letter Number: 214A00004924

Articles of Amendment to Articles of Incorporation

VIKKI LOMATTA COSMETICS OF FLORIDA INC			
(Name of Corporation as currently filed with the Florida Dept. of State)			
P14000020040			
(Document Number of Corporation (if known)			
Pursuant to the provisions of section 607.1006, Plorida Statutes, this Florida Profit Corporation adopts the following its Articles of Incorporation:	; amendment	(s) to	
A. If amending name, enter the new name of the corporation:			
VIKKI LAMOTTA COSMETICS OF FLORIDA INC	The new		
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the ab "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must c word "chartered," "professional association," or the abbreviation "P.A."	breviation		
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)			
C. Enter new mailing address, if applicable:			
(Malling uddress MAY BE A POST OFFICE BOX)			
D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered office address:	,	141	1817 138 138
Name of New Registered Agent		MAR -	표점 - 국장국
(Florida street address)		ਾਂ	
New Registered Office Address: , Florida (City) (Zip Code)		HII: 47	
		: 47	XXIE XXIE
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.			,

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.

X Change	<u>PT</u>	John Do	<u>e</u>	
X Remove	¥	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	Title		Name	<u>Addres</u> s
1) Change		_		***************************************
Add				
Remove				
2) Change		_		
Add				
Remove				
3) Change			·	
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

From:	03/06/	2014 12:02	#661 P.005/006
·			
		•	

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
	·
	nange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	

The date of each amendment(s) a date this document was signed.	doption:	if other than the
	-	
Effective date if applicable:	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/vere ad by the shareholders was/were si	opted by the shareholders. The number of votes cast for the amendment(s) afficient for approval.	
``	proved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s);	
"The number of votes case	for the amendment(s) was/were sufficient for approval	
by:	11	
	(voting group)	
I'he amendment(s) was/were ad action was not required.	opted by the board of directors without shareholder action and shareholder	·
The amendment(s) was/were ad action was not required.	opted by the incorporators without shareholder action and shareholder	•
Dated 3	5/14	
Signature	HI	
(By a c	director, president or other officer - if directors or officers have not been ed, by an incorporator - if in the hands of a receiver, trustee, or other court sted fiduciary by that tiduciary)	· · · · · · · · · · · · · · · · · · ·
	Harold Dubs	
	(Typed or printed name of person signing)	
	President	
•	(Title of person signing)	