P14000050865

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

Office Use Only



200262738862



08/11/14--01031--019 **35.00

C.M. 8-2014

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: BIGOTE BODY SHOP INC

DOCUMENT NUMBER: P14000050865

The enclosed Articles of Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

ABEL F MULGADO

Name of Contact Person

BIGOTE BODY SHOP INC

Firm/ Company

2320 E 11 AVE

Address

HIALEAH FL 33013

City/ State and Zip Code

ROROPESA8@AOL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ABEL F MULGADO

,786

663-8766

Name of Contact Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

■ \$35 Filing Fee

□\$43.75 Filing Fee & Certificate of Status

□\$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 A	mendment		
to Articles of Inc	corporation	IAT SI	
of	-		₽
BIGOTE BODY SHOP INC			GS THERES.
(Name of Corporation as currently filed with the F	lorida Dept. of State)	- 27 : -	- 7
P14000050865		.n <u>=</u>	≘ M
(Document Number of Corporation (i	f known)	07.4	ت ق
Pursuant to the provisions of section 607,1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the	tollowing	ament(s) to
A. If amending name, enter the new name of the corporation:			
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation "	'Co". A professional corporation na	or the abl	
B. Enter new principal office address, if applicable:	2320-2330 E 11 /	4VE	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	HIALEAH FL 330	13	
•	·		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	2320-2330 E 11 A	4VE	
(manuficulty)	HIALEAH FL 330	13	
;			
D. If amending the registered agent and/or registered office addr new registered agent and/or the new registered office address		<u>e</u>	
Name of New Registered Agent	-		
(Florida str	reet uddress)		
New Registered Office Address:	, Florida_		
(City)	(Zip	Code)	
New Registered Agent's Signature, if changing Registered Agent:			
I hereby accept the appointment as registered agent. I am familiar v	• 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 Poe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

X Remove Y Mike Jones X Add SV Sally Smith Top of Action (Check One) Title Name Address Top of Action (Check One) Title Name Add HIALEAH FL 33013 Top of Action (Check One) Title Name Add HIALEAH FL 33013 Top of Action (Check One) Top of Action (Check O	Example: X Change	<u>PT</u>	John Doe	
X Add SV Sally Smith Title Name Address Spite F	X Remove	$\underline{\mathbf{V}}$	Mike Jones	t and the state of
Type of Action (Check One) Title (Check One) Name Address Section (Check One) F 1)	_X Add	<u>sv</u>	Sally Smith	· · · · · · · · · · · · · · · · · · ·
Change	Type of Action (Check One)	Title	Name	
Add	1) Change	Р	ABEL F MULGADO	
2)	<u> </u>			HIALEAH FL 33013
Add	Remove			
Remove	2) Change	VP	JAVIER MULGADO	2320 E 11 AVE
Change Add Remove 1) Change Add Remove 5) Change Add Remove 6) Change Add Add Add	Add			
	Remove			HIALEAH FL 33013
Remove	3) Change			
4) Change	Add			
	Remove			
Remove	4) Change			40-pa-92-92-92-93-93-93-93-93-93-93-93-93-93-93-93-93-
5) Change	Add			WELL AND ADDRESS OF THE STREET
	Remove			
Remove	5) Change			
6) Change Add	Add			
Add	Remove			
Add	6) Change			
	Remove			

	TALL.
, · · · · ·	NO TO
E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)	The second
	DE L
If an amendment provides for an exchange, reclassification, or cancellation of issued s provisions for implementing the amendment if not contained in the amendment itself (if not applicable, indicate N/A)	<u>hares,</u> <u>:</u>

The date of each amendment(s) adoption: U7/15/2014 date this document was signed.	_, if other the	han the
Effective date if applicable: 07/15/2014		
(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):	14	
"The number of votes cast for the amendment(s) was/were sufficient for approval	4 AUG	P
by		457
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.	AH 9: 14	j
Dated 08/08/2014 Signature Additional Colors		
(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)		
ABE / E MUGADO (Typed or printed name of person signing)		
PRESIDEN(+		
(Title of person signing)		