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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	TION: Choice L	uxury.Corp.		
DOCUMENT NUMBER	R: <u>P1400005</u>	5498'		
The enclosed Articles of	Amendment and fee are su	bmitted for filing.		
Please return all correspo	ndence concerning this mat	tter to the following:		
		Name of Contact Person LIXUTY, COY Firm/ Company 2nd ST. Sui Address 1, FL. 33180 City/ State and Zip Code	te # 35	
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
Yalery Y	OKUDOV	at (<u>305</u> Area Co	de & 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)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
ag ne.	_ & .d.d	Panna	A didwore	

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 Amendment to Articles of Incorporation

of

Choice Luxury, Corp.		
(Name of Corporation as current	tly filed with the Florida Dept. of S	State)
P1400055498		
(Document Number of	of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corporation adopts	the following amendment(s) to
A. If amending name, enter the new name of the corporation:		
N/A		The new
name must be distinguishable and contain the word "corporating "Corp.," "Inc.," or $Co.$," or the designation "Corp," "Inc.," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation	d" or the abbreviation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	N/A	· · · · · · · · · · · · · · · · · · ·
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	TO DEC 11
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address		the English
Name of New Registered Agent N/A		- 17 - 17 - 17 - 17 - 17 - 17 - 17 - 17
(Florida s	treet address)	
New Registered Office Address:		rida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familian		he position.
N/A 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.

Example: X Change	<u>PT</u> <u>Joh</u>	nn Doe	
X Remove	<u>V</u> <u>Mil</u>	ke Jones	
X Add	<u>SV</u> <u>Sal</u>	ly Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	Δ	Karina Vakhovsky	3350 NE 19200 St.
X Add			Ste. #835
Remove			Aventura, FL. 33180
2) Change			
Add		_	
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			\
Add	,		
Remove			
6) Change			
Add			
Remove			

N/A		
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n amendment provid	les for an exchange, reclassification, or cancellation of issued shares,	
ovisions for implemen (if not applicable, in	nting the amendment if not contained in the amendment itself: adicate N/A)	
)/A		
· · · · · · · · · · · · · · · · · · ·		
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	N A	
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The date of each amendment(s) add	option:	, if other than the
date this document was signed.	•	
Effective date <u>if applicable</u> :	ASAP	
Elective date in applications.	(no more than 90 days after amendment file d	ate)
Note: If the date inserted in this blo document's effective date on the Dep	ock does not meet the applicable statutory filing requirement of State's records.	ents, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adop by the shareholders was/were suff	oted by the shareholders. The number of votes cast for the afficient for approval.	amendment(s)
	oved by the shareholders through voting groups. The followach voting group entitled to vote separately on the amenda	
"The number of votes cast fo	or the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/were adoptaction was not required.	oted by the board of directors without shareholder action an	id shareholder
The amendment(s) was/were adopt action was not required.	oted by the incorporators without shareholder action and sh	areholder
Dated/ <u>2</u> _/0	1/2017/	
Signature		
(By a dif	ector, president or other officer - if directors or officers ha	ive not been
	, by an incorporator – if in the hands of a receiver, trustee,	
appointe	ed fiduciary by that fiduciary)	
	Valery Vakulony	
-	(Typed or printed name of person signing)	
	Diesident	
-	(Title of person signing)	