P14000060725

(Re	equestor's Name)	
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(Cil	ty/State/Zip/Phon	e #)
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(Do	ocument Number)
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OF STATE OF CORPORATIONS

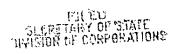
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COVER LETTER

IU:	Amenament Section
	Division of Corporations

NAME OF CORPOR	AATION: For Your In	nage Inc	
DOCUMENT NUME	ER: P1400006072	5	
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	Samuel Jacobsoi	n	
•		Name of Contact Persor	1
	For Your Image I	nc	
		Firm/ Company	
	20408 NE 15th C	t	
•		Address	
	Miami FL 33179		
		City/ State and Zip Code	e
Hav	/a@astpa.net		
	E-mail address: (to be us	ed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
Samuel Jaco	bson	_{at (} 954	, 553-2893
Name o	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment 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)
Ame Divi P.O.	ing Address ndment Section sion of Corporations Box 6327 thassee, FL 32314	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building executive Center Circle assee, FL 32301

Articles of Amendment to Articles of Incorporation



14 SEP 25 PM 1:51

For Your Image Inc	
(Name of Corporation as currently filed with the F	lorida Dept. of State)
P14000060725	
(Document Number of Corporation (if	fknown)
Pursuant to the provisions of section 607.1006, Florida Statutes, this aits Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
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 name must contain the
B. Enter new principal office address, if applicable:	20408 NE 15th Ct
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	Miami FL 33179
C. Enter new mailing address, if applicable: (Malling address MAY BE A POST OFFICE BOX)	20408 NE 15th Ct
	Miami FL 33179
D. If amending the registered agent and/or registered office addr new registered agent and/or the new registered office address	
Name of New Registered Agent	
(Florida str	eet address)
· · · · · · · · · · · · · · · · · · ·	
New Registered Office Address: (City)	, Florida (Zip Code)
New Registered Agent's Signature, if changing Registered Agents I hereby accept the appointment as registered agent. I am familiar to	
Signature of New Registered A	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)

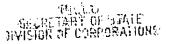
Please note the officer/director title by the first letter of the office title:

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	<u>v</u>	Mike Jo	Mike Jones				
X Add	<u>\$V</u>	Sally Sn	<u>nith</u>				
Type of Action (Check One)	<u>Title</u>		Name	Address			
1) Change	Sec		Alisa Jacobson	20408 NE 15th Ct			
Add				Miami FL 33179			
Remove							
2) Change		_					
Add							
Remove							
3) Change		_					
Add							
Remove							
4) Change		_					
Add							
Remove							
5) Change		_					
Add							
Remove							
6) Change							
Add							
Remove							

Attacl	ending or adding h additional sheet	s, if necessary).	(Be specific)			
	• • •						
				·			
							•••
		-					
If an	amendment pro	vides for an exc	change, reclas	sification, or ca	ancellation of i	ssued shares,	
prov	isions for implen	nenting the ame	endment if no	contained in	the amendmen	t itself:	
((if not applicable,	inaicate N/A)					
							



The date of each amendment(s) adoption: September 23rd 2014 14 SEP 25 PM 1:51 , if of date this document was signed.	ther than tl
·	
Effective date if applicable: (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):	
"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 September 23rd 2014	
Signature Signature	
(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)	
Samuel Jacobson	
(Typed or printed name of person signing)	
President	
(Title of person signing)	