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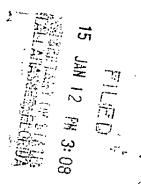
| (R | equestor's Name) | |
|-------------------------|------------------------|--------|
| (A | ddress) | |
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| (C | ity/State/Zip/Phone #) | |
| PICK-UP | ☐ WAIT | MAIL |
| (В | usiness Entity Name) | ` |
| (D | ocument Number) | |
| Certified Copies | Certificates of | Status |
| Special Instructions to | Filing Officer: | |
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Office Use Only



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JAN 13 2015 R. WHITE

COVER LETTER

TO: Amendment Section

| Division of Corporat | tions | | | | | | | |
|----------------------------|---|--|----------------------------|---|------------------------------|--------------|------|------|
| NAME OF CORPORA | rion: Esma | zra101a 14000 | Draper | v 8 | Alta | eration | ns – | Inc. |
| DOCUMENT NUMBER | R: | 14000 | 10215 | <u>ට</u> | | | | |
| The enclosed Articles of | Amendment and fee are su | bmitted for filin | g. | | | | | |
| Please return all correspo | ndence concerning this ma | tter to the follow | ving; | | | | | |
| | | | X | <i>.</i> | | | | |
| | | Mc Don | | | | | | |
| | | Name of Cor | ntact Person | | | | | _ |
| | Esn | Name of Con nenalda | 1 Dra | per | 8 A | leray | Lons | Inc |
| | | Firm/C | mnany | | | | | |
| | 1495 Ro | ilhead | Blus | # | 4 | | | |
| | Naples | Add: | 7411 |) | | | | |
| _ | | City/ State ar | nd Zip Code | | | | | |
| | Taxhisp | \sim | 0001 | _ | | | | |
| | E-mail address: (to be us | | , | | <u> </u> | | | |
| | L-man address. (to be di | sed for future and | nuar report non | ncanon) | | | | |
| For further information co | oncerning this matter, pleas | se call· | | | | | | |
| | ild Moral | | -029 | 15 | ·/ 2. | | | |
| | | at (_ | 239 Area Code & | - 60 | 11 - 22 | 3 7 <u>0</u> | | |
| Name of C | Contact Person | | Area Code & | ¿ Daytime | Telephone | Number | | |
| Enclosed is a check for th | e following amount made | payable to the Fl | orida Departme | ent of State | | | | |
| \$35 Filing Fee | □\$43.75 Filing Fee & Certificate of Status | S43.75 Filin Certified Co (Additional enclosed) | opy copy is | \$52.50 Fil Certificate Certified ((Additiona is enclose | of Status Copy al Copy | | | |
| | Address | | Street Add | | | | | |
| | nent Section of Corporations | | Amendmen | | | | | |
| P.O. Bo | | | Division of Clifton Bui | | DIIS | | | |
| | ssee, FL 32314 | | 2661 Execu | | r Circle | | | |

Tallahassee, FL 32301

| Articles of Ame | ndment 😘 |
|---|--|
| to Articles of Incorr | poration |
| Articles of Incorp | FILED |
| Esmeralda Drapen | 95 Alterotroge 68 Inc |
| (Name of Corporation as currently filed with the Flor | ida Dept. of State) |
| P 14000 1021 50 | FALL ANASSERVALONIDA |
| (Document Number of Corporation (if ki | nown) |
| Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Flo</i> its Articles of Incorporation: | orida Profit Corporation adopts the following amendment(s) to |
| A. If amending name, enter the new name of the corporation: | |
| Esmalada's Drap | serves and Alterations Inc |
| name must be distinguishable and contain the word "corporation," "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Coword "chartered," "professional association," or the abbreviation "P.A | "company," or "incorporated" or the abbreviation ". A professional corporation name must contain the 4." |
| B. Enter new principal office address, if applicable: | 1495 Railhead Blub |
| (Principal office address <u>MUST BE A STREET ADDRESS</u>) | # Suite #4 |
| | 1495 Railhead Blub # Suite #4 Xkyles FL 34110 |
| C. Enter new mailing address, if applicable: | |
| (Mailing address MAY BE A POST OFFICE BOX) | ~ |
| | Same. |
| | |
| D. If amending the registered agent and/or registered office address | in Florida automého nama afek |
| new registered agent and/or the new registered office address: | in Fiorius, enter the name of the |
| Name of New Registered Agent | /_ |
| | /A· |
| (Florida street | |
| (1 what street | uuur ess) |
| New Registered Office Address: (City) | , Florida (Zip Code) |
| (Cay) | (Zip Coue) |
| | |
| New Registered Agent's Signature, if changing Registered Agent: | |
| 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.

| Example: X Change | <u>PT</u> <u>Johr</u> | n Doe | |
|-------------------------------|--|-------------|--|
| X Remove | Y <u>Mik</u> | e Jones | |
| X Add | <u>SV</u> <u>Sall</u> | y Smith | |
| Type of Action (Check One) | Title N/A | Name NAME | Address \(\sum_{\lambda} \setminus \) |
| 1) Change | $\frac{N/A}{}$ | <i>Ν</i> /Δ | D/A. |
| Add | | | |
| Remove | | | |
| 2) Change | M************************************* | | |
| Add | | | |
| Remove | | | |
| 3) Change | | | |
| Add | | | |
| Remove | | | |
| 4) Change | - | | |
| Add | | | |
| Remove | | | |
| 5) Change | | | |
| Add | | | |
| Remove | | | |
| 6) Change | | | |
| Add | | | |
| Remove | | | |

| Attach additional sheets, if necessary). | icles, enter char (Be specific) | | | | |
|---|--------------------------------------|--------------------------------------|-----------------------------|--|-----------------|
| | 17/17 | | | | |
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| If an amendment provides for an exc | hange, reclassifi | ication, or cand | ellation of is | sued shares, | |
| provisions for implementing the ame | hange, reclassift | ication, or canc contained in the | ellation of is amendment | sued shares, itself: | |
| If an amendment provides for an exclusions for implementing the ame (if not applicable, indicate N/A) | hange, reclassif | ication, or cand contained in the | ellation of is amendment | sued shares, itself: | |
| provisions for implementing the ame | hange, reclassif | ontained in the | ellation of is amendment | sued shares, itself: | |
| provisions for implementing the ame | hange, reclassif endment if not c | ontained in the | ellation of is amendment | sued shares, itself: | |
| provisions for implementing the ame | hange, reclassif | ontained in the | ellation of is | sued shares, itself: | |
| provisions for implementing the ame | hange, reclassif | ontained in the | ellation of is | sued shares, itself: | |
| If an amendment provides for an exc provisions for implementing the ame (if not applicable, indicate N/A) | hange, reclassifendment if not o | ontained in the | ellation of is | sued shares, itself: | |
| provisions for implementing the ame | hange, reclassif | ontained in the | ellation of is | sued shares, itself: | |
| provisions for implementing the ame | hange, reclassif | ontained in the | ellation of is | sued shares, itself: | |

| The date of each amendment(s) adoption: | , if other than the |
|--|---------------------|
| date this document was signed. | |
| Effective date <u>if applicable</u> : | _ |
| (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. | |
| DatedO1/06/2015 | |
| 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) | |
| (Typed or printed name of person signing) | _ |
| | |

(Title of person signing)