P15000001426

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2021 FEB -2 PH 1:35 SECRETARY OF STATE

3120121

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	HON: MARIANELLOS.	, INC.		
DOCUMENT NUMBE	P15000001.126	. =-		
The enclosed Articles of .	A <i>mendment</i> and fee are su	bmitted for filing.		
Please return all correspo	ndence concerning this ma	tter to the following:		
		MARIA ELENA LEON PE	ERAZA	
		Name of Contact Person	n	
	MA	ARIELE'S FLOWER DESIGN, INC.		
_		Firm/ Company		
		13249 SW 51 ST		
_	Address			
	MIRAMAR, FL 33027			
		City/ State and Zip Cod	· ·	
	Al	FOROMERO2003@GM/	AIL.COM	
	E-mail address: (to be us	sed for future annual report	notification)	
For further information co	oncerning this matter, plea	786	683-8539	
Name of 0	Contact Person	at (at Co	de & Daytime Telephone Number	
Enclosed is a check for th	e following amount made	payable to the Florida Dep		
S35 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		Amenc Divisio	Address Iment Section on of Corporations entre of Tallahassee	
		2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		

Articles of Amendment to Articles of Incorporation of

FILED

2021 FEB -2 PM 1: 35

MARIANELLOS INC.

P15000001426 (Document Number of Corpora Pursuant to the provisions of section 607,1006, Florida Statutes, this <i>Florida I</i> its Articles of Incorporation:	ith the Florida Dept. of State LARY UF STATE TALLAHASSEE, FL ution (if known)		
Pursuant to the provisions of section 607,1006, Florida Statutes, this <i>Florida I</i>	ition (if known)		
	Profit Corporation adopts the following amendment(s) to		
A. If amending name, enter the new name of the corporation:			
MARIELE'S FLOWER DESIGN, INC.	The new		
name must be distinguishable and contain the word "corporation," "company, "Inc." or Co.," or the designation "Corp," "Inc," or "Co" - A profess "chartered," "professional association," or the abbreviation "P.A."	" or "incorporated" or the abbreviation "Corp." ional corporation name must contain the word		
B. Enter new principal office address, if applicable:	5117 CHICKADEE ST		
(Deligning) office address MUST RE A STREET ANIMPESSA	T CLOUD, FL 34771		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	13249 SW 51 ST		
	MIRAMAR, FL 33027		
D. If amending the registered agent and/or registered office address in F	lorida, enter the name of the		
new registered agent and/or the new registered office address:			
Name of New Registered Agent			
ıFlorida street addre:	(8)		
New Registered Office Address:	, Florida		
City	(Zip Code)		

Check if applicable

 $[\]Box$ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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)

Example:

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.

\underline{X} Change	PT	John Doe	
X Remove	\underline{V}	Mike Jones	
X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change			
Add			
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	ng additional Articleress, if necessarys,	(Be specific)	·		
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fan amandmant se	<u>ovides for an excha</u> i	nge, reclassification	on, or cancellation	of issued shares,	
i an amenomen <u>t Dr</u>	ementing the amend	<u>iment if not conta</u>	ined in the <u>amend</u>	<u>lment itself:</u>	
provisions for impl	le, indicate NA)				
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The date of each amendment(s) a	loption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this b document's effective date on the De	lock does not meet the applicable statutory filing requirements, the partment of State's records.	is date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were add action was not required.	opted by the incorporators, or board of directors without shareholder	action and shareholder
■ The amendment(s) was/were add by the shareholders was/were se	opted by the shareholders. The number of votes cast for the amenda officient for approval.	nent(s)
	proved by the shareholders through voting groups. The following steech voting group entitled to vote separately on the amendment(s):	itement
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	"	
•	(voting group)	
01 Dated	/27/2021	
Signature	rector, president of other officer – if directors or officers have not be	een
selecte	d, by an incorporator - if in the hands of a receiver, trustee, or other red fiduciary by that fiduciary)	
арроні	MARIA ELENA LEON PERAZA	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	