To:

Fax: (850) 617-6380

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06/26/2019 10:41 AM

6/25/2019 Division of Corporations

> Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : VALEZAR & ASSOCIATES

Account Number : I20150000092 Phone : (305)252-5505 Fax Number : (888)346-7187

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:_

COR AMND/RESTATE/CORRECT OR O/D RESIGN **BARGAIN BOWS INC**

Certificate of Status	0
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Help

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CO	RPORATION: Bargain Bows In	c.				
	P15000009058					
The enclosed Ar	ticles of Amendment and see are	submitted for filing.				
Please return all	correspondence concerning this n	natter to the following:				
	Cynthia Vazquez					
	Name of Contact Person					
	Valezar & Associates Inc					
	Firm Company					
12485 SW 137th Ave Ste-206						
	Miami, FL					
	City/ State and Zip Code					
	mirtha@valezar.com					
-	E-mail address: (to be	used for future annual repor	notification)			
For further infort	nation concerning this matter, plea	ase call:				
Mirtha Almanza	•	305	252-5505 			
N	ame of Contact Person	Area Cu	ode & Daytime Telephone Number			
Enclosed is a che	ck for the following amount made	payable to the Florida Dep	artiment of State:			
■ \$35 Filing Fo	ee □\$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		Ameno Divisio Cliftor 2661 E	Address Iment Section on of Corporations (Building Executive Center Circle			

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Fax: 13052525505

To:

H190001976113

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Articles of Amendment Articles of Incorporation of

Bargain Bows Inc.	259 JUN 26 A S 26
(Name of Corporation	as currently filed with the Florida Dept. of State)
P15000009058	Sha ada sa
(Documer	nt Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida S its Articles of Incorporation:	Statutes, this Florida Profit Corporation adopts the following amendmen
A. If amending name, enter the new name of the corp	oration:
	The new
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp," word "chartered," "professional association," or the ab	"corporation," "company," or "incorporated" or the abbreviation "Inc," or "Co". A professional corporation name must contain the observation "P.A."
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDR)</u>	ESS)
C. Enter new malling address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered new registered agent and/or the new registered off	
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	
New Registerea Office Adaress:	(City) Florida, Florida
lew Registered Agent's Signature, if changing Registe	ered Agent:
nerevy accept the appointment as registered agent. I at	m familiar with and accept the obligations of the position.
Sionatur	re of New Registered Agent if changing

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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 Doc	
X Remove	<u>v</u>	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	VP	Tara Fernandez	560 Johnson St
Add			Almont, MI 48003
X Remove			
2) Change			
Add			,
Remove			
3) Change			
Add			
Remove			A
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
б) Change			
Add			
Remove			

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om: Cynthla Moncada	Fax: 13052525505	HIMOUUI	Fax: (850) 617-6380	Page: 6 of 6	06/26/2019 10:41 AM
The date of each date this docum	ent was signed.				, if other than
Effective date j		12/2019 (no more t	hun 90 days after amendment	file date)	
Note: If the dr	nte inserted in this ective date on the D	block does not meet the epartment of State's recor	applicable statutory filing rec	prirements, this date v	vill not be listed as
Adoption of A	mendment(s)	(CHECK ONE)			
		lopted by the shareholders ufficient for approval.	. The number of votes cast fo	or the amendment(s)	
			rs through voung groups. The ed to vote separately on the a		
"The n	umber of votes eas	t for the amendment(s) wa	s/were sufficient for approval		
by		(voting group)		. .	
		(voting group)			
☐ The amendm		opted by the board of dire	ectors without shareholder acti	on and shareholder	
The amendm	ent(s) was/were ad ot required.	opted by the incorporators	s without shareholder action a	nd shareholder	
	06/14/2011 Dated)			
			Socranding by:		
	Signature		3E4E2HAB/99540	·	
	selecte		officer - if directors or office in the hands of a receiver, tra- ciary)		
		Johil Parbtani			
		(Typed or pri	nted name of person signing)		
		President	_ ~~		
		(7	itle of person signing)		