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## COR AMND/RESTATE/CORRECT OR O/D RESIGN FORMAL ONE TUXEDO, INC.

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## COVER LETTER

TO: Amendment Section Division of Corporations FORMAL ONE TUXED INC NAME OF CORPORATION: DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: CARIOS RAMOS
Name of Contact Person Firm/ Company 8979 SW 40 STREET Address
MIAMI FLA. 33165
City/ State and Zip Code Carlos CSC-SHG. COM
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at ( 126 ) 2531444

Area Code & 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 & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Mailing Address

Street Address

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

> 98:t0 9t0Z/90/tt 302233666

Amendment Section Division of Corporations

P.O. Box 6327 Tallahassee, FL 32314

## Articles of Amendment to Articles of Incorporation

of		
FORMAL ONE TUXE	ENO INC.	
(Name of Corporation as currently fi	led with the Florida Dept. of State)	
P150000 20407		
(Document Number of Co	orporation (if known)	_ <del></del>
Pursuant to the provisions of section 607.1006, Florida Statutes, this Flatts Articles of Incorporation:	rida Profit Corporation adopts the following	g amendment(s) to
A. If amending name, enter the new name of the corporation:		
A/A		The new
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.	". A professional corporation name must c	bbreviation contain the
B. Enter new principal office address, if applicable:	2979 SW 40 STR	<u>. Ti</u>
(Principal office address MUST BE A STREET ADDRESS)	MIAMI FLORIDA 33	
-	FUMPLE FLEDE ISA SC	7163
•		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	2979 SW 40 STREE MIASH FLORIDA 33	ぎ(
Muning andress MAT HE ATOM OFFICE BOX)		1 1 1 1
-	MIASH FLORIDA 33	العك_
-		<del>-</del>
D. If amending the registered agent and/or registered office address	in Florida, enter the name of the	
new registered agent and/or the new registered of fice address:		
Name of New Registered Agent	ARIDS RAMOS	
(Florida street o	uldress)	-
New Registered Office Address: 8917 500	Florida 551	(0-3)
MIANI CI.	+D 572667 Florida 331 V (Zip C	.oae)
, the total	CIGA	
New Registered Agent's Signature, If changing Registered Agent:	•	•
I hereby accept the appointment as registered agent. I am familiar with	and accept the obligations of the position	Je _
NA		V V
		SET
Signature of New Regis	tered Agent, if changing	1-5 AM
	•	
		ELCO ST CO
	•	

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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.

Example: <u>X</u> Change	PT John I	<u> </u>	
X Remove	V Mike	Jones .	
` <u>X</u> Add	SV Sally	Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1)Change	4.7.	VASILIOS MAHERONAIS	8450 SW 8TH ST.
Add		·	HIASHI FLA. 33144
Remove			
2)Change	<u>V.P.</u>	VASILIOS MAMERONIA	3979 SW 40 STREET
✓_ Add			HIAMI FLORIDA 33165
Remove	^		
3) Change	Pres.	CARLOS PAMOS	8450 SW STH ST.
Add	+5Ec.		MIARI FLA 33144
Remove			
4)Change	Pres	CANOS RAHOS	3979 SW 40 STREET
√ Add	+Sec.		MIAMI Frontida 33165
Remove			
5) Change	<u> </u>		
Add			
Rелюче			
δ) Change			
Ada	- · · · <del></del>		
Remove			

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	sheets, if necessary).				
	NA				
	<u> </u>				
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rovisions for im	provides for an exclusion plementing the amenosistic amenosistic (N/A)	inge, reclassification diment if not conta	on, or cancellation ingd in the amendr	of Issued shares, nent itself:	
	NA				
	1				

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The date of each amendment(s) adoption:
Effective date if applicable: 1 (- 1 - 1 5 (no more than 90 days after amendment file date)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
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)
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 11-1-1-6
Signature
(By a director, presidence of other officer - it 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)
(Typed or printed name of person signing)
PRESIDENT
(Title of person signing)

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