## P15000027017

| (Re                     | questor's Name)    |             |  |  |
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| (Cit                    | ry/State/Zip/Phone | e #)        |  |  |
| PICK-UP                 | WAIT               | MAIL.       |  |  |
| (Bu                     | isiness Entity Nar | ne)         |  |  |
| (Document Number)       |                    |             |  |  |
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SECRETARY OF STATE SECRETARY OF STATE OF CORPORATIONS

Amend 10 4,13,15

## COVER LETTER

**TO:** Amendment Section Division of Corporations

| NAME OF CORPORATION: Clever Clothing and Merchandise, Inc.   |  |  |  |  |
|--|--|--|--|--|
| DOCUMENT NUMBER: P15000027017  |  |  |  |  |
| The enclosed Articles of Amendment and fee are submitted for filing.   |  |  |  |  |
| Please return all correspondence concerning this matter to the following:  |  |  |  |  |
| Jennifer Langbecker  |  |  |  |  |
| Name of Contact Person   |  |  |  |  |
| Clever Clothing and Merchandise, Inc.  |  |  |  |  |
| Firm/ Company  |  |  |  |  |
| 2871 Eldron Blvd SE  |  |  |  |  |
| Address  |  |  |  |  |
| Palm Bay, FL 32909   |  |  |  |  |
| City/ State and Zip Code   |  |  |  |  |
| jennifer.langbecker@clevercloaks.com   |  |  |  |  |
| E-mail address: (to be used for future annual report notification)   |  |  |  |  |
| For further information concerning this matter, please call:   |  |  |  |  |
| Jennifer Langbecker at (321 ) 325-5592   |  |  |  |  |
| Name of Contact Person Area Code & Daytime Telephone Number  |  |  |  |  |
| Enclosed is a check for the following amount made payable to the Florida Department of State:  |  |  |  |  |
| \$35 Filing Fee Certificate of Status  Certificate of Status  Certificate of Status  Certificate of Status  Certified Copy (Additional copy is enclosed)  Certified Copy (Additional Copy is enclosed) |  |  |  |  |
| Mailing Address Street Address   |  |  |  |  |
| Amendment Section Amendment Section  |  |  |  |  |
| Division of Corporations  Division of Corporations   |  |  |  |  |
| P.O. Box 6327 Clifton Building   |  |  |  |  |
| Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301   |  |  |  |  |



April 2, 2015

JENNIFER LANGBECKER CLEVER CLOTHING AND MERCHANDISE INC 2871 ELDRON BLVD SE PALM BAY, FL 32909

SUBJECT: CLEVER CLOTHING AND MERCHANDISE, INC.

Ref. Number: P15000027017

We have received your document for CLEVER CLOTHING AND MERCHANDISE, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must have original signatures.

You failed to sign the form.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton Regulatory Specialist II

Letter Number: 215A00006592

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## **Articles of Amendment** to , Articles of Incorporation

| DINSECRE FILES       |    |
|----------------------|----|
| 2015 APR 13 PM       | ŧ  |
| 2015 APR 13 PM 3: 30 | W. |

## Clever Clothing and Merchandise, Inc.

| (Document Number of Corporation (  | (if known)  |         |
|--|---|---------|
| Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:  | s Florida Profit Corporation adopts the following am  | endmen  |
| A. If amending name, enter the new name of the corporation:  |   |         |
| N/A  | The   | new!    |
| name must be distinguishable and contain the word "corporatio"<br>"Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation | on," "company," or "incorporated" or the abbre "Co". A professional corporation name must conto | viation |
|  | 6180 Babcock St. SE   |         |
| B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)  | Suite 1A13  |         |
|  | Palm Bay, FL 32909  |         |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  | 2871 Eldron Blvd SE   |         |
| <u></u>  | Palm Bay, FL 32909  |         |
|  |   |         |
| D. If amending the registered agent and/or registered office add   | iress in Florida, enter the name of the   |         |
| new registered agent and/or the new registered office addres   | <u>s:</u>   |         |
| Name of New Registered Agent N/A   |   |         |
| (Florida st  | treet address)  |         |
| New Registered Office Address:   | , Florida   |         |
| (City  | (Zip Code)  |         |

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>    | John Doe            |                     |
|-------------------------------|--------------|---------------------|---------------------|
| X Remove                      | <u>v</u>     | Mike Jones          |                     |
| X Add                         | <u>sv</u>    | Sally Smith         |                     |
| Type of Action<br>(Check One) | <u>Title</u> | Name                | <u>Addres</u> s     |
| 1) Change                     | SV           | Ronald Langbecker   | 2871 Eldron Blvd SE |
| Add                           |              |                     | Palm Bay, FL 32909  |
| Remove                        |              |                     |                     |
| 2) Change                     | PT           | Jennifer Langbecker | 2871 Eldron Blvd SE |
| Add                           |              |                     | Palm Bay, FL 32909  |
| Remove                        |              |                     |                     |
| 3) Change                     |              |                     |                     |
| Add                           |              |                     |                     |
| Remove                        |              |                     |                     |
| 4) Change                     |              |                     |                     |
| Add                           |              |                     | ····                |
| Remove                        |              |                     |                     |
| 5) Change                     |              |                     |                     |
| Add                           |              |                     |                     |
| Remove                        |              |                     |                     |
| 6) Change                     |              |                     |                     |
| Add                           |              |                     |                     |
| Remove                        |              |                     |                     |

| E. If amending or adding additional Articles, enter change(s) here:  (Attach additional sheets, if necessary). (Be specific) |   |   |                                       |  |
|--|---|---|---------------------------------------|--|
|  | (Be specific)   |   |                                       |  |
| N/A  |   |   |                                       |  |
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| If an amendment provides for an exch provisions for implementing the amen (if not applicable, indicate N/A)                  | ange, reclassification, or<br>ndment if not contained i | cancellation of issue<br>in the amendment its | d shares,<br>elf:                     |  |
| //A  |   |   |                                       |  |
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|  |   |   |                                       |  |

| The date of each amendmen                        |   | , if other than the |
|--|---|---------------------|
| date this document was signed                    |   |                     |
| Effective date if applicable:                    | 03/26/2015  |                     |
|  | (no more than 90 days after amendment file date)  | <del></del>         |
| Adoption of Amendment(s)                         | (CHECK ONE)   |                     |
|  | re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.  |                     |
|  | re approved by the shareholders through voting groups. The following statement ed for each voting group entitled to vote separately on the amendment(s):  |                     |
| "The number of vote                              | s cast for the amendment(s) was/were sufficient for approval  |                     |
| by   | (voting group)  |                     |
|  | (voting group)  |                     |
| The amendment(s) was/we action was not required. | re adopted by the board of directors without shareholder action and shareholder   |                     |
| The amendment(s) was/we action was not required. | ere adopted by the incorporators without shareholder action and shareholder   |                     |
| Dated_03/2                                       | 26/2015   |                     |
|  | Ronald Langbecker   |                     |
| (I<br>s  | By a director, president or other officer – if directors or officers have not been elected, by an incorporator – if in the hands of a receiver, trustee, or other court ppointed fiduciary by that fiduciary) |                     |
|  | Ronald Langbecker   |                     |
|  | (Typed or printed name of person signing)   | <del>_</del>        |
|  | Vice-President  |                     |
|  | (Title of person signing)   | <del></del>         |