P150000 30619

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SECULATION OF STAIR
OALL WHASSEFUL ORIDA

OCT 12 2014 C. CARROTHERS

COVER LETTER

NAME OF CORPORATION: PLUS 58 OUTFIT INC.
DOCUMENT NUMBER: P15000030619
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
JORGE A TRUJILLO Name of Contact Person PLUS 58 OUTFIT INC.
Name of Contact Borner
Name of Confact Person
PLUS 5X OUTFIT INC.
Firm/ Company
···
2250 NW 114TH AVE UNIT 1C CCS4518
Address
MIAMI FL 33172
City/ State and Zip Code
JTRUJILLOALARCON@GMAIL, COM E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
JORGE A TRUJILO at 305, 4577366
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 Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy (Ad

Mailing Address

TO: Amendment Section

Division of Corporations

Amendment Section **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

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

is enclosed)

Articles of Amendment to Articles of Incorporation of

PLUS 58 OUTF	FIT I NC.	
(Name of Corporat	ion as currently filed with the Florida Dept.	of State)
P15000030615	તે	~ >
(Docum	ment Number of Corporation (if known)	70 6
Pursuant to the provisions of section 607.1006, Florid its Articles of Incorporation:	la Statutes, this Florida Profit Corporation ad	opts the following amendment(s)
A. If amending name, enter the new name of the c	orporation:	
NI	A	The new
name must be distinguishable and contain the won "Corp.," "Inc.," or Co.," or the designation "Corp. word "chartered," "professional association," or the B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET ADD	p." "Inc," or "Co". A professional corporal eabbreviation "P.A." e:	rated" or the abbreviation tion name must contain the
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO		/ A
D. If amending the registered agent and/or registered new registered agent and/or the new registered		e of the
Name of New Registered Agent	N/A	
	47	
New Registered Office Address:	······································	Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent.	1 am familiar with and accept the obligations	of the position.
Sign	nature 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 Doc	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	D	JOSE M GOMEZ	2250 NW 114TH AVE
Add			UNITIC CCS4518
X Remove			MIAMI FL 33172
2) Change	·		
Add			
Remove			
3) Change	**********	radit of the contract of the c	
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			-
Remove			
6) Change		_	
Add			APPARATE SECTION SECTI
Remove			

If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	
If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself;	<u> </u>
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provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	
(t) this experience, materials 1991)	
N/A	
<u> </u>	

The date of each amendment(s) adoption: OCT/07/2015, if other than the
Effective date if applicable: (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
hy" (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 OCT/07/2015
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)
JORGE A TRUJIIIO (Typed or printed name of person signing)
DIRECTOR
(Title of person signing)