## P15000046525

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	V HOME FRAGA	NCES CORP		
DOCUMENT NUME	P15000046525 ER:			
The enclosed Articles	of Amendment and fee are sul	bmitted for filing.		
Please return all corres	pondence concerning this mat	ter to the following:		
	RAFAEL VELAZQUEZ			
	Name of Contact Person V HOME FRAGRANCES INC			
	606 NW 62 STREET	Firm/ Company		
	Address MIAMI, FL 33150			
		City/ State and Zip Cod	e	
ADM	IN@VRUGSANDHOME.CO	ОМ		
·	E-mail address: (to be us	ed for future annual report	notification)	
For further information	concerning this matter, pleas	e call:		
RAFAEL VELAZQUEZ		305	759-9910	
Name of Contact Person			de & Daytime Telephone Number	
Enclosed is a check for	the following amount made p	payable to the Florida Depa	artment of State:	
□ \$35 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		Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		

## **Articles of Amendment**

to

Α	Articles of Incorporation	71 to
V 11.00		1 Property of the property of
	ragances	COSP SE 111 -2 PM 1:28
P15000046525	n as∕cu√rently filed with the Flori	ida Dept. of \$tate) 15 Jun 2
(Docume	ent Number of Corporation (if know	vn)
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	Statutes, this Florida Profit Corpor	ration adopts the following amendment(s) to
A. If amending name, enter the new name of the cor	rporation:	
V HOME FRAGRANCES INC		The
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp.," word "chartered," "professional association," or the a	" "Inc," or "Co". A professional	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADD)		
C. Enter new mailing address, if applicable:	<del></del>	<u> </u>
(Mailing address <u>MAY BE A POST OFFICE BOX</u>	<u> </u>	
D. If amending the registered agent and/or registered new registered agent and/or the new registered of	ed office address in Florida, enter office address:	the name of the
Name of New Registered Agent		<u>/</u>
	(Florida street address)	
New Registered Office Address:		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Regis	stered Agent:	
I hereby accept the appointment as registered agent. I	am familiar with and accept the ob	ligations of the position.
-		<del></del>
Signa	ture of New Registered Agent, if ch	anging

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 (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	<u> </u>		
Add			
Remove			
2) Change		_\	
Add			/
Remove			/
3) Change			
Add			
Remove			<del></del>
4) Change		_	
Add			
Remove			
5) Change		_/	
Add	/		
Remove			
6) Change			
Add			
Remove			

f amending or adding additional Articles, enter chan Attach additional sheets, if necessary). (Be specific)	Motol mosa.
	<del></del>
	<del></del>
/	
- <del></del>	
	······································
/	
an amendment provides for an exchange, reclassifi	cation, or cancellation of issued shares,
provisions for implementing the amendment if not co	ontained in the amendment itself:
(if not applicable, indicate N/A)	
	and the second s
<del></del>	

	U3/28/13		
The date of each amendment(s)	) adoption:		, if other than the
date this document was signed.			
	05/28/15		
Effective date <u>if applicable</u> :			217 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	(no more than 90 d	days after amendment file dalië	) \$10.4 to 1000 0 000 0
Note: If the date inserted in the document's effective date on the	is block does not meet the applicab	ole statutory filing requirement	5 this date-will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)		
The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The ne sufficient for approval.	umber of votes cast for the ame	endment(s)
	approved by the shareholders through for each voting group entitled to vo		
"The number of votes ca	ast for the amendment(s) was/were	sufficient for approval	
by		**	
	(voting group)		
action was not required.	adopted by the board of directors was		
•	ج -		
05/28/1: Dated	·		
Signature(By sele	a director, president or other officer cted, by an incorporator – if in the hointed fiduciary by that fiduciary)		
	RAFAEL VELAZQUEZ		
	(Typed or printed na	me of person signing)	
	PRESIDENT		
	(Title of	person signing)	
	( i iiic oi	person signing)	