

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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(((H15000292256 3)))



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To.

Division of Componations

Fax Number : (850)617-6380

From:

Account Name : LEGALZOOM.COM INC

Account Number - 120010000062

Phone Fax Number

± (323)952-9600 : (323)952-3889 DEC 1 1 2014

C. CARROTHERS

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

COR AMND/RESTATE/CORRECT OR O/D RESIGN ON MY OWN EYEWEAR, INC.

Certificate of Status	0
Certified Copy	1
Page Count	06
Estimated Charge	\$43.75

Electronic Filing Menu

Corporate Filing Menu

Help

3

COVER LETTER

TO: Amendment Sec Division of Corp			
NAME OF CORPO	RATION: ON MY OWN EY	EWEAR, INC.	
DOCUMENT NUM	BER: P15000051029		-
The enclosed Article	s of Amendment and fee are su	bmitted for filing.	
Please return all corr	espondence concerning this ma	tter to the following:	
	Cheyenne Moseley		
		Name of Contact Person	1
	LegalZoom.com, Inc.		
		Firm/ Company	
	100 W. Broadway Suite 10	00	
		Address	
	Glendale, CA 91210		
		City/ State and Zip Cod	c
		•	
d.fii	ne1231@gmail.com	16.6.	
	E-man address; (to be us	sed for future annual report	notification)
For further informati	on concerning this matter, pleas	se call	
Cheyenne Mosele	у	at (323) 962-8600 ext 7950 de & Daytine Telephone Number
Name of Contact Person		Area Co	de & Daytime Telephone Number
Enclosed is a check	for the following amount made	payable to the Florida Depa	artment of State:
☐ \$35 Fiting Fcc	□\$43.75 Filing Fee & Certificate of Status	S43 75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ar Di P.i	ailing Address mendment Section vision of Corporations O. Box 6327 Illahassee, FL 32314	Ameno Divisio Clifton 2661 E	Address Innent Section on of Corporations Building Executive Center Circle assee, FL 32301

Articles of Amendment		
te .		
Articles of incorporation of	سنا 12- دم	2
	177	<u> </u>
ON MY OWN EYEWEAR, INC.	17 C)	
(Name of Corporation as currently filed with the Florida Dept. of State)	m - €1.	m
P15000051029	> 5	()
(Document Number of Corporation (if known)		0
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following are its Articles of Incorporation:	eridinga(s)	全
A. If amending name, enter the new name of the corporation:		
On Our Own Eyawaar, Inc.	河	••
"Corp.," "Inc.," or Co., " or the designation "Corp.," "Inc." or "Co". A professional corporation name must contaword "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable; (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable; (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered event and/or registered office address in Florida, enter the pame of the new registered agent and/or the new replacered office address: Name of New Registered Agent	an ne	
CHANGE SET THE VESTIGE AS THE FAMILY AS THE PARTY OF THE		
(Florida street takireas)		
New Registered Office Address: Florida		
(City) (Zip Code)		
New Registered Acent's Signature, if chapping Registered Agent; I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position. Signature of New Registered Agent, if chapping.		

nddress of each Officer (ddress nose the officer)d P = President: V = Vice Executive Officer; CFO held. President. Treasure Changes should be mise	and/or D , if nacess trector fits President = Chief i nr, Directs I in the fo aves the c e, and Sal	tary) le by the first letter of the office title: it, T= Treasurer; S= Secretary; D= Director; TR=: Financial Officer, If an officer/director holds more or would be PTD. Illawing manner. Currently John Doe is listed as the virporation, Sally Smith is named the V and S. These ly Smith, SV as an Add.	Trustee: C = Chairman or Clerk; CEO = Chief than one title, list tha first letter of each office. PST and Mike Jones is listed as the V. There is
_ -	PI	John Doe	
X Remove	<u>v</u>	Mike Iones	
_X Add	S.Y.	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1)Change			
Add			
Remove			
2) Change			
Add			
Remove			
3)Change			
Add			
Remove			
			
4) Change			
Add			
Remove			
5) Change			
_		-	
Add			
Remove			
σ) Change			
Add		- -	
Remove			

Page 2 of 4

E. <u>If a</u>	nending or adding addition	onal Articles, enter chan	ge(s) bere:		
(Altz	ch additional sheets, if nec	essary). (Be specific)			
			<u> </u>		
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F. <u>I(a</u>	amendment provides for	r an exchange, reclassifi	cation, or cancellation	of issued shares.	
PL	visions for implementing (if not applicable, indicate	the amendment if not co	entained in the amend	ment itself:	
					·
	. <u></u>				
					

		•
	11/4/2015	
The date of each amendment(s) add date this document was signed.	option: 17442015	if other than the
date this document was signed.		
Effective date if applicable:	(no more than 90 days after omendment file date)	
	(no more than 90 days after omendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
The amendment(s) was/were adop by the shareholders was/were suf	sted by the shareholders. The number of votes cast for the amendment(s) licient for approval.	
	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
	or the amendment(s) was/were sufficient for approval	
by	(voting group)	
•	(voting group)	
The amendment(s) was/were adopted notion was not required.	nted by the board of directors without shareholder action and shareholder	
The unpendment(e) wee/were adm	oted by the incorporators without shareholder action and shareholder	
action was not required.		
Dated ///10)	15//	
Signature	hh-	
	rector president or other officer - if directors or officers have not been	
sciected	by an incorporator - if in the hands of a receiver, trustee, or other court	
appointe	ed fiduciary by that fiduciary)	
	David Fine	
_	(Typed or printed name of person signing)	
	Treasurer	
·•	(Title of person signing)	