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| (Re | equestor's Name) | |
|-------------------------|--------------------|-------------|
| (Ad | idress) | |
| (Ac | idress) | |
| (Cit | ty/State/Zip/Phon | e #) |
| PICK-UP | WAIT | MAIL. |
| (Bu | ısiness Entity Naı | me) |
| (Do | ocument Number |) |
| Certified Copies | _ Certificate | s of Status |
| Special Instructions to | Filing Officer: | |
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OCT 29 2015

C LEWIS

COVER LETTER

| TO: Amendment Section Division of Corpor | | | |
|---|---|--|--|
| NAME OF CORPORATION: TERNURA BABY FASHION CORP. DOCUMENT NUMBER: P 150 0066587 | | | |
| The enclosed Articles of | f Amendment and fee are su | bmitted for filing. | |
| Please return all corresp | ondence concerning this ma | tter to the following: | |
| _ | OBdulin | a Eaneir | |
| | | Name of Contact Person | ı |
| _ | | Firm/ Company | |
| 815 NE 199 SUITE 201 | | | |
| | 815 NE19 MIAMI | \mathcal{F} Address 33 | 179. |
| _ | | City/ State and Zip Code | . 1 |
| | Tennonaba | HASMIONES | mail.com. |
| | E-mail address: (to be us | for future annual report | notification) |
| For further information | concerning this matter, pleas | se call: | |
| ObdULIA | 5 AREIL | at (305 | |
| Name of | Contact Person | Area Co | de & 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 & 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) |
| | ng Address dment Section | | Address ment Section |
| Division of Corporations | | Amendment Section Division of Corporations | |
| P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle | | | |
| i anan | (43500, I E J2J14 | | ssee, FL 32301 |

Articles of Amendment

| | Articles of Amendment to | BIVILLER CONTROL OF THE |
|---|---|---|
| Ternura | Articles of Incorporation of Rahu Fashion | Corp 15 OCT 27 PH 12: 42 |
| (<u>Name of C</u> | orporation as currently filed with the F | orida Dept. of State |
| | P150000 | 066581 |
| | (Document Number of Corporation (if k | nown) |
| Pursuant to the provisions of section 607.100 its Articles of Incorporation: | 6, Florida Statutes, this Florida Profit Con | poration adopts the following amendment(s) to |
| A. If amending name, enter the new name | of the corporation: | |
| name must be distinguishable and contain "Corp.," "Inc.," or Co.," or the designation word "chartered," "professional association | n "Corp," "Inc," or "Co". A professio | The new or "incorporated" or the abbreviation nal corporation name must contain the |
| B. Enter new principal office address, if an (Principal office address MUST BE A STRE | | |
| C. Enter new mailing address, if applicabe (Mailing address MAY BE A POST OF) D. If amending the registered agent and/o | <u></u> | oter the name of the |
| new registered agent and/or the new re | | tter the name of the |
| Name of New Registered Agent | | |
| | (Florida street address) | |
| | (F toriga biree address) | |
| <u>New Registered Office Address</u> : | (City) | , Florida (Zip Code) |
| New Registered Agent's Signature, if chan I hereby accept the appointment as registered | ging Registered Agent: d agent. I am famìliar with and accept th | e obligations of the position. |
| | Signature of New Registered Agent i | fchanaina |

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 | PT Jo | <u>hn Doe</u> | |
|-------------------------------|-------------------|-----------------|---|
| X Remove | <u>v</u> <u>M</u> | ike Jones | |
| _X Add | <u>SV</u> Sa | ally Smith | |
| Type of Action (Check One) | <u>Title</u> | <u>Name</u> | <u>Addres</u> s |
| 1) Change | UP | HelmoTh GARCICA | 815 NE 199 ST HIALII FL-SUITEROI 33179 |
| <u></u> ✓ Add | | | FL-SUITE 201 331/7 |
| Remove | | | |
| 2) Change | | | |
| Add | | | |
| Remove | | | |
| 3) Change | | | |
| Add | | | |
| Remove | | | |
| 4) Change | | | |
| Add | | | |
| Remove | | | |
| 5) Change | | | |
| Add | | | |
| Remove | | | |
| 6) Change | | | · |
| Add | | | |
| Remove | | | |

| f 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) | |
|---|--|
| an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: | |
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| The date of each amendment(s) adoption: | , if other than the |
|---|--|
| date this document was signed. | DIVIDE CONTRACTOR |
| Effective date if applicable: 10/27/20/5 | 15 OCT 27 PH 12: 42 |
| (no more than 90 days after amendment fil | le date)13 00 |
| Note: If the date inserted in this block does not meet the applicable statutory filing requi document's effective date on the Department of State's records. | rements, this date will not be listed as the |
| Adoption of Amendment(s) (CHECK ONE) | |
| The amendment(s) was/were adopted by the shareholders. The number of votes cast for the by the shareholders was/were sufficient for approval. | the amendment(s) |
| ☐ The amendment(s) was/were approved by the shareholders through voting groups. The formust be separately provided for each voting group entitled to vote separately on the ame | ollowing statement endment(s): |
| "The number of votes cast for the amendment(s) was/were sufficient for approval by Obolicia SANCIA." | |
| (voting group) | |
| ☐ The amendment(s) was/were adopted by the board of directors without shareholder action was not required. | n and shareholder |
| The amendment(s) was/were adopted by the incorporators without shareholder action and action was not required. | d shareholder |
| Dated 10/26/2015 | |
| Signature That Turn | |
| (By a director, president or other officer - if directors or officer | |
| selected, by an incorporator – if in the hands of a receiver, trust appointed fiduciary by that fiduciary) | |
| OBDULIA GARCIA | <u> </u> |
| (Typed or printed name of person signing) | |
| PRESIDENT. | |
| (Title of person signing) | |