## P/600039692

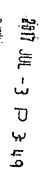
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JUL 10 2017
T. LEMIEUY



## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	RATION: MYB BOUTIQUE	CORP	
	BER: P16000039692		
	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this man	tter to the following:	
	MIRELYS MARTINEZ		
		Name of Contact Persor	
	MYB BOUTIQUE CORP		
	<del></del>	Firm/ Company	
	6230 SW 8TH ST UNIT B		
		Address	
	WEST MIAMI FL 33144		
		City/ State and Zip Code	
miral	y.martinez1@gmail.com		
		sed for future annual report	notification
	in management of the	, cu ioi iumo uminan report	
For further informatio	n concerning this matter, pleas	se call:	
MIRELYS MARTINEZ		at ( <u>786</u>	925-9636
Name of Contact Person		Area Co	de & Daytime Telephone Number
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	ertment of State:
<b>园</b> \$35 Filling Fee	□\$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)
Am Div P.O	iling Address endment Section ision of Corporations Box 6327 ahassee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section on of Corporations Building xecutive Center Circle assee, FL 32301

## Articles of Amendment to Articles of Incorporation of

Afticles	of
MYB BOUTIQUE CORP	
(Name of Corporation as ev	arrently filed with the Florida Dept. of State)
P16000039692	
(Document Nur	nber of Corporation (if known)
Pursuant to the provisions of section 607,1006. Florida Statute its Articles of Incorporation:	es, this Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporati	on:
	The new
name must be distinguishable and contain the word "corp "Corp," "Inc," or Co.," or the designation "Corp," "Inc, word "chartered," "professional association," or the abbrevi	poration," "company," or "incorporated" or the abbreviation " or "Co" - A professional corporation name must contain the
B. Enter new principal office address, if applicable:	6230 SW 8TH ST UNIT B
(Principal office address MUST BE A STREET ADDRESS)	WEST MIAMI FL 33144
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	6230 SW 8TH ST UNIT B
	WEST MIAMI FL 33144
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office a	
MIRELYS MARTI	NEZ
Name of New Registered Agent 6230 SW 8TH ST	T :
(Flo	orida street address)
New Registered Office Address: MIAMI	- 33144 . Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fair	

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 (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	P	YISELL SOLER	765 W 72ND PL
Add X Remove			HIALEAH FL 33014
2) Change	D	MIRELY'S MARTINEZ	5421 E 7 AVE
Add X Remove			HIALEAH FL 33013
3) Change	Р	MIRELYS MARTINEZ	5421 E 7 AVE
X Add Remove			HIALEAH FL 33013
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change			
Add Remove			

If amending or adding additional Ar (Attach additional sheets, if necessary).	(Be specific)	HCIC.		
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				7.
If an amendment provides for an exc	change, reclassificatio	n, or cancellation of is	sued shares.	
provisions for implementing the am (if not applicable, indicate N/A)	ienament it not contai	ned in the amendment	itseit:	
A				
				<del></del>
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	05/31/2017	
The date of each amendment(s) date this document was signed.	adoption:	, if other than the
Р.	16000039692	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
<b>Note:</b> If the date inserted in thi document's effective date on the	s block does not meet the applicable statutory filing requirements, this da Department of State's records.	te will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
■ The amendment(s) was/were a by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s sufficient for approval.	;)
	approved by the shareholders through voting groups. The following stateme for each voting group entitled to vote separately on the amendment(s):	nt
	ast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
,	(voting group)	
☐ The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and shareholde	т
☐ The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder	<u> </u>
05/31/20 Dated		•
sele	a director, president or other officer – if directors or officers have not been cted, by an incorporator – if in the hands of a receiver, trustee, or other cour pinted fiduciary by that fiduciary)	t
	MIRELYS MARTINEZ	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	