# P16000010370

Office Use Only



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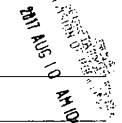
#### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	ORATION: Mode Bella Fashio	ns, Inc.				
DOCUMENT NUM	P16000070370					
The enclosed Article	es of Amendment and fee are su	bmitted for filing.				
Please return all corr	respondence concerning this mat	ter to the following:				
	Reliader Heredia					
	Name of Contact Person					
	Mode Bella Fashions, Inc.					
	Firm/ Company					
	16161 SW 43rd Terrace					
	Address					
	Miami, Fl. 33185					
		City/ State and Zip Cod	e			
rely	@cpaadjusters.com					
	E-mail address: (to be us	ed for future annual report	notification)			
For further informati	on concerning this matter, pleas	e call·				
. or railing morning	on concerning this matter, pretts	c cuii.				
Reliader Heredia		at (	724-8826			
Name of Contact Person		Area Code & 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 **Articles of Incorporation**



## (Name of Corporation as currently filed with the Florida Dept. of State)

nt(s) to

Mode Bella Fashions, Inc.	
	(Document Number of Corporation (if known)
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006. Florida Statutes, this Florida Profit Corporation adopts the following amendment
A. If amending name, enter the new na	me of the corporation:
name must be distinguishable and cont "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	The new vain the word "corporation," "company," or "incorporated" or the abbreviation ation "Corp," "Inc," or "Co". A professional corporation name must contain the tion," or the abbreviation "P.A."
B. Enter new principal office address, (Principal office address MUST BE A ST	
C. Enter new mailing address, if appli (Mailing address MAY BE A POST of  D. If amending the registered agent an new registered agent and/or the new	d/or registered office address in Florida, enter the name of the
Name of New Registered Agent	Reliader Heredia
	16161 SW 43rd Terrace Miami, Fl. 33185
	(Florida street address)
New Registered Office Address:	, Florida
New Registered Agent's Signature, if cl I hereby accept the appointment as regist	hanging Registered Agent: ered agent. I am familiar with and accept the obligations of the position.

### 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.

X Change	<u>PT</u>	John Doe	
X Remove	$\underline{V}$	Mike Jones	
X Add	<u>şv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	<u>P</u>	Marta Y. Betancourt	16161 SW 43rd Terrace
Add			
X Remove			Miami, Fl. 33185
2) Change	P	Reliader Heredia	16161 SW 43rd Terrace
X Add			
Remove			Miami, Fl. 33185
3 ) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
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If an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
provisions for implementing the amer (if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
(у піл аррисавіє, інасале пілі)	

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendment file d	ate)
Note: If the date inserted in this block does not meet the applicable statutory filing requirem document's effective date on the Department of State's records.	ents, 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 a by the shareholders was/were sufficient for approval.	nmendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The follow must be separately provided for each voting group entitled to vote separately on the amenda	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action an action was not required.	d shareholder
The amendment(s) was/were adopted by the incorporators without shareholder action and sha action was not required.	nreholder
08/06/2017	
Signature Standard Salka	
(By a director, president or other officer - if directors or officers ha	
selected, by an incorpolator $\frac{1}{2}$ if in the hands of a receiver, trustee. (appointed fiduciary by that fiduciary)	or other court
Reliader Heredia	
(Typed or printed name of person signing)	
President	
(Title of person signing)	