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## **COVER LETTER**

TO: Amendment Section

Division of Corporations				
NAME OF CORPORATION: GIGM LOUNGE CORPORATION  DOCUMENT NUMBER: P17000047591				
The enclosed Articles of Amendment and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
Argela P Ardrade  Name of Contact Person  Glam Lounge COPORTION  Firm/ Company  13550 SW 120th Street, Unit 506, Suite 131  Address  Miami FL, 33186  City/ State and Zip Code  Jamoungemiamiogmail. Com  E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
Angela P Andrack at 786, 452-6870				
Name of Contact Person Area Code & Daytime Telephone Number				
Enclosed is a check for the following amount made payable to the Florida Department of State:				
\$35 Filing Fee  Certificate of Status  Certified Copy (Additional copy is enclosed)  Certified Copy (Additional Copy is enclosed)  Certified Copy (Additional Copy is enclosed)				
Mailing Address Street Address				
	Amendment Section			
·	Division of Corporations Clifton Building			
Tallahassee, FL 32314 2661 Executive Center Circle				

2661 Executive Center Circle Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

Glam Lourge Corporation	currently filed with the Florida Dept. of State)
P17000147591	currently med with the Fiorida Dept. of State)
(Document No	umber of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutits Articles of Incorporation:	tes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corpora	tion:
	The new
	rporation," "company," or "incorporated" or the abbreviation c," or "Co". A professional corporation name must contain the viation "P.A."
B. Enter new principal office address, if applicable:	
(Principal office address <u>MUST BE A STREET ADDRESS</u>	
	i i i i i i i i i i i i i i i i i i i
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
	<u> </u>
D. If amending the registered agent and/or registered off new registered agent and/or the new registered office	
Name of New Registered Agent	
Num of New Inguisered Agent	<del></del>
	orida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am for	
Signature o	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>	<u>John Doe</u>	
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	<u>V</u>	Carlos J Flores	8186 NW 99th terraich
X_ Add			Hilleah FL, 33016
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change	<del></del>		
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	<u>icles, enter change(s) here</u> : (Be specific)
. 9	
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f an amundment provides for an arch	hange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	

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 date)	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date w document's effective date on the Department of State's records.	ill 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 amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"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 and shareholder action was not required.	
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated_1126118	
Signature Chyl Cuplu	
(By a director, president or other officer - if directors or officers have not been	<del></del>
selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
Anyell PAndrade (Typed or printed name of person signing)	
- (typed or printed name of person signing)	
<u>President</u>	
(Title of person signing)	