## P17000053348

(Red	questor's Name)	
(Add	dress)	
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JUL 1 4 2017 S. PRATHER

## COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: Cialactic Boutique		
	ER:		
The enclosed Articles	of Amendment and fee are so	ibmitted for filing.	
Please return all corres	pondence concerning this ma	nter to the following:	
	Nathalic del Valle		
		Name of Contact Person	1
		Firm. Company	
	15577 SW 25th Ten		
		Address	
	Miami, Honda 33185		
		City State and Zip Cod	e ·
galact	icboutique@gmail.com		
<del></del>	E-mail address: (to be u	sed for future annual report	notification)
For further information	concerning this matter, plea	se call:	
Nathalie del Valle		786 at (	6120601
Name c	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	irtment of State:
S35 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)
	ing Address		Address ment Section
	nument Section sion of Corporations		ment Section of Corporations
P,O,	Box 6327	Clifton Building	
Talla	diassee, FL 32344	266143	xecutive Center Circle

Tallahassee, FL 32304

## Articles of Amendment

to

## Articles of Incorporation

of

Galactic Boutique	
(Name of Corporation :	as currently filed with the Florida Dept. of State)
117(000)53348	
(Document	(Number of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Stits Articles of Incorporation:	atutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporate	oration:
N/A	The new
name must be distinguishable and contain the word " "Corp.," "Inc.," or Co.," or the designation "Corp." word "chartered," "professional association," or the abb	'corporation,'' "company," or "incorporated" or the abbreviation "bue" or "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRE	N/A
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	7 JUL 10 PH 3: 45
D. If amending the registered agent and/or registered new registered agent and/or the new registered offi	office address in Florida, enter the name of the
Name of New Registered Agent N/A	<del></del>
	(Florala street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registe Thereby accept the appointment as registered agent. Tan	
Signatur	re 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 Dov 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 Dov. PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: <u>X</u> Change	PT Jo	hn Doe	
X Remove	<u>V</u> <u>M</u>	ike Jones	
X Add	<u>SV</u> <u>Sa</u>	lly Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	<u> </u>	Nathalie del Valle	15577 SW 25th Terr
Add			Minni, Florida
Nemove			33485
2) Change	ļ <sup>,</sup>	Alexis del Valle	. 15577 SW 25th Terr
Add			Miami, Florida
Remove			33185
3.) Change	٧	Nathalie del Valle	15577 SW 25th Terr
Add			Miami, Horida
Remove			33185
4) Change	V	Alyssa Lazara Perez	14907 SW 21st Terr
Add			Miami, Horida
Remove			33185
51 Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change (Attach additional sheets, if necessary). (Be specific)	
N/A	
	<del></del>
F. If an amendment provides for an exchange, reclassific	ation, or cancellation of issued shares,
provisions for implementing the amendment if not con (if not applicable, indicate NiA)	ntained in the amendment ((selt)
N/A	
NA .	

07/03/2017		
The date of each amendment(s) adoption:	_, if other th	ian the
date this document was signed.		
N/A Effective date if applicable:		
eno 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 will a document's effective date on the Department of State's records.	not be listed	as the
Adoption of Amendment(s) (CHECK ONE)		
☐ The amendment(s) was/were adopted by the shareholders. The number of votes east 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		
hy		
(voling group)	学 二	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	OHE TO	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	PH 3	
DatedSignature	3: 15	
(By director president or other officer—if directors or officers have not been selected, by an incorporator—if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	-	
Nathalie del Valle		
(Typed or printed name of person signing)		
Vice President		
t little of person signing)		