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COVER LETTER

TO: Amendment Section

Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: CLAPACT SHOEL CORP.

DOCUMENT NUMBER: P1700053828 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Marie of Contact Person Blade Incontrols LLG
Firm/ Company 14650 (12 2017 5, 4 103 11/An/ / 33/85 City/ State and Zip Code E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Haru-Bulkun Name of Contact Person at ($\frac{\partial \mathcal{L}}{\partial \mathcal{L}}$) $\frac{2\mathcal{L}}{\partial \mathcal{L}} = 2 \oplus \mathcal{L}$ Area Code & Davtime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: S35 Filing Fee □\$43.75 Filing Fee & ☐\$43.75 Filing Fee & ☐\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Mailing Address Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation



COMPACT SHOES CORP.

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



P1+0060>	りひくな	ب
	of Corporation (if known)	
Pursuant to the provisions of section 607,1006, Florida Statutes, thi its Articles of Incorporation:	s Florida Profit Corporation	adopts the following amendmen
A. <u>If amending name, enter the new name of the corporation:</u>		
THPAGTSHOES name must be distinguishable and contain the word "corporate	CURP.	The new
name must be distinguishable and contain the word "corporate "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc," or word "chartered," "professional association," or the abbreviation	"Co" A professional corpe	porated" or the abbreviation pration name must contain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	nla	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	<u>rla</u>	
D. If amending the registered agent and/or registered office ado	dross in Florida, enter the n	ame of the
new registered agent and/or the new registered office addre		ame <u>yr ene</u>
Name of New Registered Agent	7/~	
	treet address)	
New Registered Office Address:	(Cim)	, Florida
	(Cily)	(Zip Code)
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familiar		ons of the position.
	nla	
Signature of New	Registered Agent if changing	,

Page 1 of 4

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	\underline{V}	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) Change	~		
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add Remove			
4) Change			· ·
Add			
Remove			
5) Change		_	
Add			
Remove			
6) Change			
Add			
Remove			

f amending or adding i Attach additional sheets,	if necessary).	(Be specific)				
						
						
		·				
						
						
an amendment provious for implementations for implementations (if not applicable, in	enting the amen	ange, reclassific: idment if not cor	ntion, or cancel ntained in the a	lation of issued mendment itse	shares, U:	
(,)						
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	N/v	ノ 				
	A 1					
	1/1					

The date of each amendment(s) adoption:	06/23/17	, if other than the
date this document was signed.		,, ,, ,, ,,,,,,,,,,,,,,,,,,,,,,,,,
Effective date if applicable:	56/23 /17 o more than 90 days after amendment file date)	
(ne	o more than 90 days after amendment file date)	
Note: If the date inserted in this block does not m document's effective date on the Department of State		s date will not be listed as the
Adoption of Amendment(s) (CHECE	K ONE)	
The amendment(s) was/were adopted by the share by the shareholders was/were sufficient for approximately sufficient for approxima		ent(s)
☐ The amendment(s) was/were approved by the sha must be separately provided for each voting grow	reholders through voting groups. The following sta- up entitled to vote separately on the amendment(s):	lement
"The number of votes cast for the amendme		
by		
(voting §	group)	
☐ The amendment(s) was/were adopted by the boar action was not required.	d of directors without shareholder action and shareh	older
☐ The amendment(s) was/were adopted by the incoraction was not required.	rporators without shareholder action and shareholde	г
Dated	// 2	
Signature +dd	Court for other officer – if directors or officers have not be	
(By a director, president	t or other officer – if directors or officers have not be rator – if in the hands of a receiver, trustee, or other	
	ed or printed name of person signing)	
(Тур	ed or printed name of person signing)	
_	President.	
	(Title of person signing)	