P17000060636

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: LOVE LOVE I	NC					
DOCUMENT NUMBER: P17000060636						
The enclosed Articles of Amendment and fee are su	bmitted for filing.					
Please return all correspondence concerning this mat	tter to the following:					
LOVETTE DOBSON						
	Name of Contact Person					
INCFILE.COM LLC	INCFILE.COM LLC					
	Firm/ Company					
17350 STATE HWY 249 STE 220						
Address						
HOUSTON, TX 77064						
	City/ State and Zip Cod	e				
EFILE1234@INCFILE.COM	M					
E-mail address: (to be us	ed for future annual report	notification)				
For further information concerning this matter, pleas	e call:					
LOVETTE DOBSON	at (888	462-3453				
Name of Contact Person		de & Daytime Telephone Number				
Enclosed is a check for the following amount made p	payable to the Florida Depa	artment of State:				
\$35 Filing Fee \$\Bigcup \$43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□S52.50 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	Idment Section Amendment Section Ion of Corporations Division of Corporations Box 6327 Clifton Building					

Articles of Amendment to Articles of Incorporation of

LOVE LOVE INC

P17000060636 (Document Number of Control Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Articles of Incorporation:			
(Document Number of Co Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Flo</i> its Articles of Incorporation:			
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Flo</i> its Articles of Incorporation:	orporation (if known)		
	rida Profit Corporation adopts the following amendment(s) to		
A. If amending name, enter the new name of the corporation:			
name must be distinguishable and contain the word "corporation," "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co' word "chartered," "professional association," or the abbreviation "P.A	". A professional corporation name must contain the		
	51 SW 11TH ST APT 522		
(Principal office address MUST RE A STREET ADDRESS)	MIAMI, FL 33130		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	51 SW 11TH ST APT 522		
! !	MIAMI, FL 33130		
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:	in Florida, enter the name of the		
Name of New Registered Agent			
(Florida street a	uddress)		
New Registered Office Address:	. Florida		
	y) (Zip Code)		

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>J</u> e	ohn Doe	
X Remove	<u>y</u> <u>N</u>	Mike Jones	
<u>X</u> Add	<u>sv</u> <u>s</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) X Change	D, P	BRIE WHITEHEAD	51 SW 11TH ST APT 522
Add			MIAMI, FL 33130
Remove			
2) X Change	D	MEL SEGOTA	51 SW 11TH ST APT 522
Add			MIAMI, FL 33130
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	cles, enter chang (Be specific)				
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If an amendment provides for an exch	nange reclassific	ation or cancell	ation of issued	shares.	
provisions for implementing the ame	ndment if not co	ntained in the ar	nendment itsel	<u>:</u>	
(if not applicable, indicate N/A)					
			- -		

The date of each amendment(s) adoption:	, if other than the
· ·	
Effective date if applicable: (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 dadocument's effective date on the 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 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):	nt
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
 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. 	r
Signature Oue Unitable (By a 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 cour appointed fiduciary by that fiduciary)	
BRIE WHITEHEAD	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	