P17000064804

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JAN 17 2018 T. LEASIEUX



COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: CREATIONS BY	LOVERA INC		
DOCUMENT NUME			******	
The enclosed Articles	of Amendment and fee are su	bmitted for filing.		
Please return all corres	pondence concerning this ma	tter to the following:		
	MIGUEL CORTIJO			
		Name of Contact Person	1	
		Firm/ Company		
	4119 TEE RD			
		Address		
	SARASOTA, FLORIDA 34	235		
		City/ State and Zip Code	e	
мсо	RTIJO@COMCAST.NET			
	E-mail address: (to be us	sed for future annual report	notification)	
or further information	concerning this matter, pleas	se call:		
MIGUEL CORTIJO		941 at (400-7110	
Name o	f Contact Person	Area Code & Daytime Telephone Nun		
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)	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327		Amend Divisio	Address Iment Section on of Corporations Building	
	thassee, FL 32314	2661 Executive Center Circle		

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

CREATIONS BY LOVERA INC.

(N) (C)	المائد العالم	Ph. da. 15	£ C
P17000064804	as currently filed with the	<u> 140110a Dept. o</u>	<u>r State)</u>
	Number of Communities (if	· I	
(Document	Number of Corporation (if	Known)	
Pursuant to the provisions of section 607.1006, Florida Statista Articles of Incorporation:	atutes, this <i>Florida Profit C</i>	<i>Torporation</i> adop	ots the following amendment(s) t
A. If amending name, enter the new name of the corpo	oration:		
LOVERA DESIGNS INC			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	Inc." or "Co". A profess		ted" or the abbreviation
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRE</u>	<u></u>		
		•	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			
D. If amending the registered agent and/or registered	office address in Florida, o	enter the name	of the
new registered agent and/or the new registered offi			
Name of New Registered Agent			
<u></u>	(Florida street address)		
New Registered Office Address:		, F	lorida
regimered types made as.	(Сиу)		(Zıp Code)
New Registered Agent's Signature, if changing Registe I hereby accept the appointment as registered agent. I am		he obligations o	f the position.
			20
Signatur	re of New Registered Agent.	if changing	
лупши	ong the regularied rigera.	y vinnging	

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	<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
I) Change			
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			-
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
() (I)			
6) Change			· · · · · · · · · · · · · · · · · · ·
Add			
Remove			

	(Be specific)	
		·
		
		_
 		
		-
f an amendment provides for an exch	nge, reclassification, or cancellation of issu-	ed shares,
provisions for implementing the ame	dment if not contained in the amendment it	<u>self:</u>
CC . A . D D C P A NO		
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		

	01/01/2018	
The date of each amendment(s) addate this document was signed.		, if other than the
	1/2018	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bedocument's effective date on the De	lock does not meet the applicable statutory filing requirements, this date wipartment of State's records.	ll not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes east for the amendment(s) flicient for approval.	
	proved by the shareholders through voting groups. The following statement 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	
bv	(voting group)	
	(voting group)	
☐ The amendment(s) was/were add action was not required.	pted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder action and shareholder	
01/08/2018 Dated	emant	
(By a d	rector, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other court ded fiduciary by that fiduciary)	
	ROMINA A. RONDA	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	