P170000/132

(Re	equestor's Name)			
(Ad	ldress)			
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(Cil	ty/State/Zip/Phon	e #)		
PICK-UP	☐ WAIT	MAIL		
(Bu	usiness Entity Nar	me)		
(Do	ocument Number)	<u> </u>		
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SECKETARY OF STATE
TAIL ANASSEE ELORIO

S. YOUNG

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: DESIGN ZONE I	BRAND CORP			
DOCUMENT NUMBI					
The enclosed Articles of	f Amendment and fee are st	bmitted for filing.			
Please return all corresp	ondence concerning this ma	tter to the following:			
	·2•	GENESIS G MARTINE	2		
-	GENESIS G MARTINEZ Name of Contact Person				
	D	ESIGN ZONE BRAND CO	PRP		
_		Firm/ Company			
	1050 BRICKELL AVENUE 1406				
-		Address			
		MIAMI_FLORIDA 33147	1		
-		City/ State and Zip Code	3		
	DESIGNZONE	EBRANDPAYMENT@GM	AIL.CÓM		
		sed for future annual report			
For further information GENESIS G MARTIN	concerning this matter, plea		0461062		
	Contact Person	at (are Coo	9864962 de & Daytime Telephone Number		
	the following amount made				
□ \$35 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 Tallahassee, Fl. 32314		Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle			

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

		he Florida Depi	i. Oi State	,
DESIGN ZONE BRAND		P1700	006	7132
(Document Number o	f Corporation	(if known)		11-0-0
ursuant to the provisions of section 607,1006, Florida Statutes, this s Articles of Incorporation:	Florida Profi	t Corporation a	dopts the f	ollowing amendment(
. If amending name, enter the new name of the corporation:				
ame must be distinguishable and contain the word "corporatio Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or " ord "chartered," "professional association," or the abbreviation	Co". A prof			
Enter new principal office address, if applicable:				
Principal office address <u>MUST BE A STREET ADDRESS</u>)				1A 18
				LONG B
				1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Enter new mailing address, if applicable: (Mailing address MAYBEA POST OFFICE BOX)				See In
<u></u>				7, 2
				22.
				0.5
. If amending the registered agent and/or registered office add		a, enter the nan	ne of the	
new registered agent and/or the new registered office address	<u>s:</u>			
Name of New Registered Agent	, <u> </u>			
	reet address)			
	reet address) (Cuy)		, Florida_	

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; CEO - 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: XChange	<u>PT</u>	John Do	<u>oe</u>	
X Remove	$\underline{\mathbf{V}}$	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>A</u> d <u>dres</u> s
1) Change	MGR		STEVE ABDUL BENJAMIN	10013 NW 26 AVENUE
X Add				MIAMI,FLORIDA 33147
Remove				
2) Change		_		
Add				
Remove				
3) Change				
Add				
Remove				
4) Change		_		
Add				
Remove				
51 Change		_		
Add				
Remove				
6) Change				
Add				
Remove				

	(Be specific)
J	
•	
	14-14-14-14-14-14-14-14-14-14-14-14-14-1
	1
	
f an amendment provides for an excl	nange, reclassification, or cancellation of issued snares,
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
f an amendment provides for an excl provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
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10/01/2018	
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)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date document's effective date on the Department of State's records.	e will 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.	ı
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statemen must be separately provided for each voting group entitled to vote separately on the amendment(s):	и
"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.	
10/05/2018 Dated	
Signature Menon Sentry	
(By a director, president or other office – 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)	
GENESIS G MARTINEZ	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	