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(R	Requestor's Name)	
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SEC LASSILITIONS

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: CATABELLA	DISTRIBUTION.	INC	
DOCUMENT NUMBER: P18000010214			
The enclosed Articles of Amendment and fee ar	e submitted for fili	ng.	
Please return all correspondence concerning this	matter to the follo	wing:	
CAMILLE POTTINGER			
	Name of Co	ontact Perso	n
CATABELLA DISTRIB	UTION, INC		
	Firm/ C	Company	
4581 WESTON ROAD, S	SUITE 382.		
	Ade	dress	
WESTON, FL 33331			
	City/ State a	ınd Zip Cod	c
catabellacouture@gmail.com			
E-mail address: (to b	e used for future a	nnual report	notification)
For further information concerning this matter, p	lease call:		
CAMILLE POTTINGER	at (305	de & Daytime Telephone Number
Name of Contact Person		Area Co	de & Daytime Telephone Number
Enclosed is a check for the following amount ma	ade payable to the l	florida Depa	artment of State:
□ \$35 Filing Fee Certificate of Statu		Сору	☐\$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		Ameno Divisio Clifton	Address Iment Section on of Corporations Building Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation of

(Name)	of Corporation as curre	ntly filed with the Florida Dept. of State)
18000010214			
	(Document Number	of Corporation (if known)	
ursuant to the provisions of section 607. s Articles of Incorporation:	1006, Florida Statutes, th	is Florida Profit Corporation adopts the fo	ollowing amendment
. If amending name, enter the new na	me of the corporation:		
	N/A		The new
ame must be distinguishable and con Corp.," "Inc.," or Co.," or the design ord "chartered," "professional associa	ation "Corp," "Inc," or	tion," "company," or "incorporated" or "Co". A professional corporation name in "P.A."	the abbreviation must contain the
. Enter new principal office address,	if applicable:	4581 WESTON ROAD	
Principal office address <u>MUST BE A STREET ADDRESS</u>) C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>)		SUITE 382	<u> </u>
		WESTON, FL 33331	
		4581 WESTON ROAD	E
		SUITE 382	
		WESTON. FL 33331	
		dress in Florida, enter the name of the	27
new registered agent and/or the nev	CAMILLE K POTTING		
Name of New Registered Agent			
New Registered Office Address:	4581 WESTON ROAD.		
	(Florida WESTON	street address)	7771
	WESTON	/City), Florida	3331
		(CIŅ)	(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>	John De	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	<u>ones</u>	
X Add	<u>sv</u>	Sally S	<u>mith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) X Change	PT	_	CAMILLE POTTINGER	4581 WESTON ROAD
Add				SUITE 382
Remove				WESTON, FL 33331
2) Change				
Add				-
Remove				
3) Change				
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
δ) Change				
Add				-
Remove				

(Attach additional sheets, if necessary).	(Be specific)
The number of shares the corporation is au	athorized to issue is 100.
 	
	· · · · · · · · · · · · · · · · · · ·
	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	the amendment is the am
The number of shares the corporation is au	ithorized to issue is 100.

	02/08/2018
The date of each amendment(s) date this document was signed.	adoption:, if other than the
	2/08/2018
Effective date <u>if applicable</u> :	/ 1 00 1 5 1 .01 1
	(no more than 90 days after amendment file date)
Note: If the date inserted in thi document's effective date on the	s block does not meet the applicable statutory filing requirements, this date will not be listed as the Department of State's records.
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
The amendment(s) was/were a by the shareholders was/were	adopted by the shareholders. The number of votes east for the amendment(s) sufficient for approval.
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):
"The number of votes co	ast for the amendment(s) was/were sufficient for approval
by	
, <u></u>	(voting group)
action was not required.	adopted by the board of directors without shareholder action and shareholder adopted by the incorporators without shareholder action and shareholder
action was not required.	
02/08/20	18
DatedSignature	
(By selec	director, president or other officer – if directors or officers have not been eted, by an incorporator – if in the hands of a receiver, trustee, or other court sinted fiduciary by that fiduciary)
	CAMILLE K POTTINGER
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)