P18000043746

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TO: Amendment Section
Division of Corporations

NAME OF CORPO	RATION: KBL ENTERPRIS	SES LIMITED CORP		
DOCUMENT NUM	IBER: P18000043746	_		
The enclosed Article.	s of Amendment and fee are su	bmitted for filing.		
Please return all corre	espondence concerning this mat	tter to the following:		
	PASCALLE M LILAVOIS			
	Name of Contact Person			
ADVOCATE LAW PARTNERS, LLC				
Firm/ Company				
10300 SW 72ND STREET, SUITE 460-1				
Address				
	MIAMI, FLORIDA 33173			
		City/ State and Zip Code		
pas	caledlegal@aol.com			
	E-mail address: (to be us	sed for future annual report	notification)	
For further information	on concerning this matter, pleas	se call:		
PASCALLE M LILA	AVOIS	305	8739917	
		de & Daytime Telephone Number		
Enclosed is a check f	or the following amount made p	payable to the Florida Depa	artment of State:	
■ \$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)	
A4-11- A I I		C4	A. B. B	

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

KBL ENTERPRISES LIMITED CORP

(Name	of Corporation as curren	tly filed with the Florida Dept. of State)	 _
P18000043746			
	(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, thi	s Florida Profit Corporation adopts the follow	ing amendment(s) to
A. If amending name, enter the new na	ame of the corporation:		
HauteLuxx Corp.			The new
	nation "Corp," "Inc," or	on," "company," or "incorporated" or the "Co". A professional corporation name mus "P.A."	abbreviation
		N/A	
B. Enter new principal office address, (Principal office address MUST BE A S			
	·		
			··
C. Enter new mailing address, if appl	icable:		
(Mailing address MAY BE A POST		N/A	
			- वि असे
D. If amending the registered agent ar new registered agent and/or the ne			3 g
	N/A		2 13
Name of New Registered Agent			
	(Florida s	treet address)	- 25 H
	N/A	,	હૈં
New Registered Office Address:		, Florida	p Code)
		1-19	,,
New Registered Agent's Signature, if c		i <mark>t:</mark> r with and accept the obligations of the position	_
I nevery accept the appointment as regis.	егей адет. Тит јитиш	with and accept the obugations of the position	
			_
	Signature of New	Registered Agent, if changing	

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: XChange	<u>PT</u>	John Doe		
X Remove	<u>V</u>	Mike Jones		
X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s	
1) Change	V	BHAGWANDAS CHUGANEY	16225 SW 103RD TER	
XAdd			MIAMI, FL 33196	
Remove				
2) Change	D	LAVINA B CHUGANEY	16225 SW 103RD TER	
X Add			MIAMI, FL 33196	
Remove				
3) Change		_	_	
Add				
Remove				
4) Change				
Add				
Remove				
5) Change		_		
Add				
Remove				
б) Change			_	
Add				
Remove				

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
N/A
A
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,
provisions for implementing the amendment if not contained in the amendment itself:
(if not applicable, indicate N/A) N/A

The date of each amendment(s) a	adoption:	, if other than the
date this document was signed.		
Effective date if applicable:	(no more than 90 days after amendment file date)	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing requirements, this date will no Department of State's records.	ot be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were ac by the shareholders was/were s	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
	oproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):	
"The number of votes cas	st for the amendment(s) was/were sufficient for approval	
by	(voting group)	
The amendment(s) was/were ac action was not required.	lopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were ac action was not required.	dopted by the incorporators without shareholder action and shareholder	
07/25/20 Dated		
a:	director provident or other officer - if directors or officers have not been	
select	director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court need fiduciary by that fiduciary)	
	KAMAL B CHUGANEY	
	(Typed or printed name of person signing)	
	PRESIDENT/CEO	
	(Title of person signing)	