From: JUAN ALBER

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet .

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H220003164713)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6380

Account Name

: ALBER TAX ACCOUNTANT

Account Number : 120150000098

. : (305)713-9142

Phone Fax Number

`: (815)550-9948

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. ••

COR AMND/RESTATE/CORRECT OR O/D RESIGN ICON BRAND MANAGEMENT CORP

| Certificate of Status | 0 | |
|-----------------------|---------|----|
| Certified Copy | . 0 | ٠. |
| Page Count | 05 | |
| Estimated Charge | \$35.00 | |

Electronic Filing Menu

Corporate Filing Menu

To:

Articles of Amendment to Articles of Incorporation of

| P18000071860 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006. Florida Statutes, this Florida Profit Corporation adopts the following ame its Articles of Incorporation: A. If amending name, enter the new name of the corporation: The name must be distinguishable and contain the word "corporation," "company, "or "incorporated" or the abbreviation "Co" Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) | |
|---|----------------|
| (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006. Florida Statutes, this Florida Profit Corporation adopts the following ame its Articles of Incorporation: A. If amending name, enter the new name of the corporation: The name must be distinguishable and contain the word "corporation." "company, "or "incorporated" or the abbreviation "Co" "Inc.," or Co.," or the designation "Corp." "Inc," or "Co". A professional corporation name must contain the "chartered." "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: | |
| Pursuant to the provisions of section 607.1006. Florida Statutes, this Florida Profit Corporation adopts the following ame its Articles of Incorporation: A. If amending name, enter the new name of the corporation: The name must be distinguishable and contain the word "corporation." "company," or "incorporated" or the abbreviation "Co" "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the "chartered." "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: | - |
| A. If amending name, enter the new name of the corporation: The name must be distinguishable and contain the word "corporation." "company," or "incorporated" or the abbreviation "Co"Inc.," or Co.,," or the designation "Corp." "Inc," or "Co". A professional corporation name must contain the "chartered." "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: | |
| The name must be distinguishable and contain the word "corporation," "company, "or "incorporated" or the abbreviation "Co" inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the "chartered." "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: | ndnient |
| The name must be distinguishable and contain the word "corporation," "company, "or "incorporated" or the abbreviation "Co" inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the "chartered." "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: | ٠ |
| "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the "chartered." "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: | |
| "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the "chartered." "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: | new |
| | orp. word |
| (Principal office address <u>MUST BE A STREET ADDRESS</u>) | |
| | 20 |
| | as ak |
| | - 0 |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | <u> </u> |
| ort. | |
| | Ċ |
| · • • • • • • • • • • • • • • • • • • • | _5 |
| D. If amending the registered agent and/or registered office address in Florida, enter the name of the | Ų |
| new registered agent and/or the new registered office address: | • |
| | • |
| Name of New Registered Agent | |
| | |
| (Florida street address) | ٠ |
| New Registered Office Address: Florida | |
| New Registered Office Address: Florida (Cip) (Zip Code) | — |
| | |
| | |
| New Registered Agent's Signature, if changing Registered Agent: | |
| I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position. | . `, |
| | |
| | |
| | . , |
| Signature of New Registered Agent, if changing | |
| Check if applicable | |
| ☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), F.S. | |

To:

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)

Example:

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) | Title | Name . | Address . | | | |
| 1) X Change | PS | MARIA A RUIZ TORREZ | 10893 NW 17TH ST | | | |
| Add | | | UNIT 127 | | | |
| Remove | | | SWEETWATER, FL 33172 | | | |
| 2) X Change | . Vb | MARIA C RUIZ TORRES | 10893 NW 17TH ST | | | |
| Add | - | | UNIT 127 : 28 | | | |
| Remove 3) Change | | | UNIT 127 SWEETWATER, FL 33 172 | | | |
| Add | | | ` <u>ω</u> | | | |
| Remove | | | AH 8 | | | |
| 4) Change | | way and the second of the seco | 8: 20 | | | |
| Add | | | | | | |
| Remove | | | | | | |
| 5) Change | | | | | | |
| Add | • | | | | | |
| Remove | | | · | | | |
| 6) Change | | | | | | |
| Add | • | | | | | |
| Remove | | | | | | |

To:

| . If amending or (Attach addition | adding additional Art al sheets, if necessary). | (Be specific) | Internal | | | | | |
|--------------------------------------|--|---------------------------------------|---|---------------------------------------|--------------|---------------------------------------|---------------------------------------|----------------|
| | • | | | | | • | | |
| | | | | | | | · . | |
| | | ···-· | | | , | | | |
| | | | | | | | | |
| | | | | · | | , | | . ` |
| | | | | | | | | |
| 1, | | · · · · · · · · · · · · · · · · · · · | | | | | | |
| ` . • | | | | | | · · · · · · · · · · · · · · · · · · · | • | • |
| | | | | | | | | |
| , | | | | | | | | |
| | | | - · · · · · · · · · · · · · · · · · · · | | | | | |
| · | | | | | | · . | ~ | |
| | | | | | | <u> </u> | D22 S | |
| | | | | | | 9−; Ju> | E. | |
| | | | | | | AS | ယ | . |
| | | | | | | <u> </u> | AH 8: | <u> है</u> ह |
| If an amendme | ent provides for an exc | hange, reclassifica | tion, or caucella | ition of issued s | hares, | | 3. 20 | |
| provisions for (if not app | ent provides for an exc implementing the am- plicable, indicate N/A) | endment if not con | tained in the ar | nendment itself | <u>:</u> | | - (| |
| | | | | • | • • • | | • | |
| | | | | | | | | |
| | · - | | | | | | • | |
| | | | · · | · · · · · · · · · · · · · · · · · · · | | . · | · , | |
| | | | | | | | ··· | |
| | | | | | | | · · · · · · · · · · · · · · · · · · · | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |

| The date of each amendment(s) ac | 09/13/2022 | | , if other than the |
|--|--|----------------------------|---------------------------|
| date this document was signed. | option. | · | , if once that the |
| Effective date if applicable: | | | |
| | (no more than 90 days after amend | lment file.date) | |
| Note: If the date inserted in this b document's effective date on the De | lock does not meet the applicable statutory filin partment of State's records. | ng requirements, this date | will not be listed as the |
| Adoption of Amendment(s) | (CHECK ONE) | | |
| The amendment(s) was/were add action was not required. | pted by the incorporators, or board of directors of | without shareholder action | and shareholder |
| The amendment(s) was/were add by the shareholders was/were su | pted by the shareholders. The number of votes flicient for approval. | cast for the amendment(s) | |
| must be separately provided for | roved by the shareholders through voting groups each voting group entitled to vote separately on for the amendment(s) was were sufficient for ap | the amendment(s): | 2022 SEP 13. AM |
| by | | | SSS |
| . 09/13/2022 Dated | (voling group) | | M 8: 20 |
| selected | tector, production other officer – if directors or b, by an incorporator – if in the hands of a received fiduciary by that fiduciary) | | |
| | MARIA A RUIZ TORRES | | |
| | (Typed or printed name of person sig | ming) | |
| | PS | • | |
| | (Title of person signing) | , | |