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| (Requestor's Name) |
|---|
| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
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Office Use Only



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COVER LETTER

TO:

| TO: | Registration Se Division of Cor | | | | | |
|----------|------------------------------------|--|--|---|---|--|
| erin m | DA | AROSE CLOTHING COMPAN | NY INC | | | |
| SUBJE | .c.: | Name of Lim | ited Liability Company | | | |
| The end | closed Articles of | Amendment and fee(s) are sub | mitted for filing. | | | |
| Please | return all correspo | ondence concerning this matter | to the following: | | | |
| | | ELVIRA RAMIREZ | | | | |
| | | | Name of Person | | | |
| | | AA EXPRESS SERVICES | S INC | | | |
| | | | Firm/Company | | | |
| | | | | | | |
| | Address | | | | | |
| | | DEERFIELD BEACH FL | 33442 | | | |
| | | . A DVIDDE CORED LIGITOR | City/State and Zip Co | de | | |
| | | AAEXPRESSERVICES@ | gGMAIL.COM to be used for future annu | ial report notifi | ication) | |
| For furt | ther information o | concerning this matter, please c | | • | | |
| ELVIR | A RAMIREZ | | | 5960323 | | |
| | Name o | t Person | at ()_ Area Code | Daytime | Telephone Number | |
| Enclose | ed is a check for the | he following amount: | | | | |
| □ \$25 | 5.00 Filing Fee | ■ \$30.00 Filing Fee & Certificate of Status | ☐ \$55.00 Filing Fe Certified Copy (additional copy is | | ☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) | |
| | Registr | ING ADDRESS: ration Section on of Corporations | Regist | ET/COURH ration Section on of Corpora | | |

P.O. Box 6327 Tallahassee, FL 32314 Clifton Building
2661 Executive Center Circle

Tallahassee, FL 32301



August 12, 2019

ELVIRA RAMIEREZ 410 S POWERLINE RD DEERFIELD BEACH, FL 33442

SUBJECT: DAROSE CLOTHING COMPANY, INC

Ref. Number: P18000088179

We have received your document for DAROSE CLOTHING COMPANY, INC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The above entity is a Florida corporation and the document and fee submitted are for a Florida limited liability company. The correct form is enclosed and an additional filing fee of \$5.00 is due.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Rebekah White Regulatory Specialist II Supervisor

Letter Number: 619A00016561

2019 AUG 22 AH II: 0

COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPO | RATION: DAROSE CLOTE | IING COMPANY INC | |
|--|---|---|--|
| | BER: P18000088179 | | |
| | of Amendment and fee are su | ibmitted for filing. | |
| Please return all corre | spondence concerning this ma | tter to the following: | |
| | ELVIRA RAMIREZ | | |
| | | Name of Contact Perso | n |
| | AA EXPRESS SERVICES I | NC | |
| | | Firm/ Company | |
| | 410 S POWERLINE RD | | |
| | | Address | |
| | DEERFIELD BEACH | | |
| | | City/ State and Zip Cod | e |
| AAE | XPRESSSERVICES@GMAI | L.COM | |
| | E-mail address: (to be us | sed for future annual report | notification) |
| For further informatio | n concerning this matter, pleas | se call: | |
| ELVIRA RAMIREZ | | at (| 5960323 |
| Name | of Contact Person | Area Co | de & Daytime Telephone Number |
| Enclosed is a check fo | r the following amount made | 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) |
| Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 | | Ameno Divisio | Address Iment Section on of Corporations Building |
| | | 2661 Executive Center Circle | |

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

of

2013/11 27 :411:36

DAROSE CLOTHING COMPANY INC

| (Name of Corporation as curren | tly filed with the Florida Dept. of State) | | |
|---|--|--|--|
| 918000088179 | | | |
| (Document Number | of Corporation (if known) | | |
| Pursuant to the provisions of section 607.1006, Florida Statutes, thi its Articles of Incorporation: | s Florida Profit Corporation adopts the following amendment(s) | | |
| A. If amending name, enter the new name of the corporation: | | | |
| N/A | The new | | |
| name must be distinguishable and contain the word "corporat, "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation | "Co". A professional corporation name must contain the | | |
| B. Enter new principal office address, if applicable: | 114 NW 25TH ST | | |
| (Principal office address <u>MUST BE A STREET ADDRESS</u>) | MIAMI, FI. 33127 | | |
| | | | |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | 114 NW 25TH ST | | |
| | MIAMI, FL 33127 | | |
| | | | |
| D. If amending the registered agent and/or registered office ad- new registered agent and/or the new registered office addre | | | |
| Name of New Registered Agent N/A | | | |
| | | | |
| (Florida s | treet address) | | |
| New Registered Office Address: | , Florida | | |
| | (City) (Zip Code) | | |
| | | | |
| New Registered Agent's Signature, if changing Registered Agen | | | |
| I hereby accept the appointment as registered agent—I am familian | with and accept the obligations 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, at 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 = Chi Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each officheld. 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 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 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 | M | LUIS ALEXIS QUINTERO | 3515 SW 39TH BLVD APT 33C |
| $\frac{1}{X}$ Remove | | | GAINESVILLE, FL 32608 |
| 2) Change | CEO | DANIEL QUINTERO | 114 NW 25TH ST |
| Add X Remove | | | MIAMI FL 33127 |
| 3) Change | D | OSWALDO JOSE SUELS RAMIRE | AV PRINCIPAL DEL CAFETAL |
| X Add | | | ED. LOS CLAVELES PISO 2 |
| Remove | | | APT 23 CARACAS - VENEZUEL |
| 4) Change | | | |
| Add Remove | | | |
| 5) Change | | | |
| Add | | | |
| Remove | | | |
| 6) Change | | | |
| Add | | | - |
| Remove | | | |

| | additional sheets, i) | (Be s | specific) | | | |
|-------------|--|---|---------------------|---------------------------------------|------------------|-------------|
| /A | | | | | | |
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| If an ar | <u>nendment provide</u> ions for implemen | s for an exchange, ting the amendmen | reclassification, | or cancellation o | f issued shares, | |
| (<i>if</i> | not applicable, ind | licate N/A) | it it not contained | a in the anignain | ent usen: | |
| /A | | | | | | |
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| The date of each amendment(s) adoption: |
|--|
| 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 will not be listed as a document's effective date on the Department of State's records. |
| 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. |
| ☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s): |
| "The number of votes east 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. |
| 08/05/2019 Dated |
| (By a director, president or other officer – 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) |
| DANIEL QUINTERO |
| (Typed or printed name of person signing) |
| CEO |
| (Title of person signing) |