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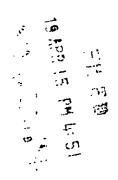
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COVER LETTER

TO: Amendment Section

Division of Corporations NAME OF CORPORATION: Laura's Moonshine Jewelry, Inc. DOCUMENT NUMBER: P19000026073 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Laura Steff Name of Contact Person Firm/ Company 15694 82nd Lane North Address Loxahatchee, Florida 33470 City/ State and Zip Code laurasteff@aol.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (561) 633-6810

Area Code & Daytime Telephone Number Laura Steff Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: ■ \$35 Filing Fee □S43.75 Filing Fee & □S43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Street Address Mailing Address Amendment Section Amendment Section **Division of Corporations** Division of Corporations P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Laura's Moonshine Jewelry Inc. (Name of Corporation as currently filed with the Florida Dept. of State) P19000026073 (Document Number of Corporation (if known) Pursuant to the provisions of section 607,1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: Paparazzi by Laura Steff Inc. name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc." or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." N/A B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: N/A (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: (City) (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

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 | . ила зла <u>РТ</u> | John Do | | | |
|----------------------------|------------------------|----------|-------------|---|------------|
| X Remove | <u>V</u> | Mike Jo | <u>mes</u> | | |
| X Add | <u>\$V</u> | Sally Sn | nith | | |
| Type of Action (Check One) | <u>Title</u> | | <u>Name</u> | | Address |
| 1) Change | | _ | N/A | | |
| Add | | | | | |
| Remove | | | | | |
| 2) Change | | | - | _ | |
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| E. <u>If ame</u> (Attach | e <mark>nding or adding addition</mark> al . An additional sheets, if necessar | Articles, enter change y). (Be specific) | (s) here: | | |
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| F. <u>If an a</u> nrovi | amendment provides for an e isions for implementing the | exchange, reclassificat imendment if not con- | ion, or cancellation ained in the amend | of issued shares, ment itself: | |
| (| if not applicable, indicate N/s | !) | | | |
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| N/A | | | | | |
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| The date of each amendment(s) adoption late this document was signed. | n: | , if other than the |
|---|---|-----------------------------|
| Effective date <u>if applicable</u> : | | |
| | (no more than 90 days after amendment file date) | |
| Note: If the date inserted in this block document's effective date on the Department | oes not meet the applicable statutory filing requirements, this datent 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 was/were sufficient | y the shareholders. The number of votes cast for the amendment(s t for approval. |) |
| | by the shareholders through voting groups. The following stateme voting group entitled to vote separately on the amendment(s): | nt |
| | amendment(s) was/were sufficient for approval | |
| by | (voting group) | |
| | (voting group) | |
| ☐ The amendment(s) was/were adopted be action was not required. | y the board of directors without shareholder action and shareholde | r |
| The amendment(s) was/were adopted by action was not required. | y the incorporators without shareholder action and shareholder | |
| 4/5/2019 Dated | | |
| Signature Vaen | 2. ST. D. | |
| (By a director selected, by a | , president or other officer – if directors or officers have not been n incorporator – if in the hands of a receiver, trustee, or other court uciary by that fiduciary) | |
| Laura | Steff | |
| | (Typed or printed name of person signing) | |
| Presid | lent | |
| | (Title of person signing) | |