	1378
(Requestor's Name)	
(Address)	500329420915
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	05/16/1901012001 **35.00
ertified Copies Certificates of Status	
Special Instructions to Filing Officer:	
Office Use Only	
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## COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:

DOCUMENT NUMBER: \_\_\_\_\_

The enclosed Articles of Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

FABIELIZ GARCIA RAMOS

Name of Contact Person

ORCHIDS DESIGN INC

Firm/ Company

3020 LAMBERTON BLVD STE 107

Address

ORLANDO FL 32825

City/ State and Zip Code

FABIELIZGARCIA@GMAIL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

 FABIELIZ GARCIA RAMOS
 at (407)
 666-8238

 Name of Contact Person
 Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

\$35 Filing Fee

S43.75 Filing Fee & Certificate of Status S43.75 Filing Fee & Certified Copy (Additional copy is enclosed) □\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)

<u>Mailing Address</u> 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	
DRCHIDS DESIGN INC		
(Name of Corp	oration as currently filed with the Fi	orida Dept. of State)
19000037378		
(1)	Document Number of Corporation (if kn	lown)
ursuant to the provisions of section 607,1006, F	· · · · ·	2019 HAY 15 P 3: 44
ursuant to the provisions of section 607,1006, F s Articles of Incorporation:	lorida Statutes, this <i>Florida Profit Cor</i>	<i>poration</i> adopts the following amendme
		ALCANASSEE COMMAN
. If amending name, enter the new name of t	the corporation:	
LOOMING DESIGNS INC		The new
ame must be distinguishable and contain the Corp.," "Inc.," or Co.," or the designation "( ord "chartered," "professional association," o	Corp." "Inc." or "Co". A profession	
. Enter new principal office address, if applied	cable	
Principal office address <u>MUST BE A STREET</u>		
<ol> <li>Enter new mailing address, if applicable: (Muiling address <u>MAY BE A POST OFFICE</u>)</li> </ol>	$F(Rt)N_{0}$	
Maning united State Degration (Marter		
<ul> <li>If amending the registered agent and/or reg new registered agent and/or the new registered.</li> </ul>		er the name of the
Name of New Registered Agent		
<u></u>		
	(Florida street address)	
		Florida
<u></u>		Florida (Zip Code)
		Florida (Zip Code)
<u>New Registered Office Address:</u>	(Ciŋ)	, Florida (Zip Code)

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:

$\underline{\lambda}$ Change	<u>P1</u>	John Doe			
X Remove	$\underline{\mathbf{V}}$	Mike Jones			
<u>X</u> Add	<u>SV</u>	Sally Smith			
<u>Type of Action</u> (Check One)	<u> </u>	Name	<u>Addres</u> s		
1) Change	S	FABIELIZ GARCIA RAMOS	2522 GREENWHLOW DR		
X Add			ORLANDO FL 32825		
Remove			·		
2) Change					
Add					
Remove					
3.) Change	1-51-1				
Add					
Remove					
4) Change					
Add					
Remove					
5) Change					
Add					
Remove					
6) Change					
Add					
Remove					

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E. If amending or adding additional Articles, enter change(s) here:

(Attach additional sheets, if necessary). (Be specific)

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) .

The date of each amendment(s) ac	loption:	, if other than th
date this document was signed.		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
N. 4 . 10.4 . 1		
Note: If the date inserted in this b document's effective date on the De	lock does not meet the applicable statutory filing requirements, this date will r partment of State's records.	iot be listed as th
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes east for the amendment(s) Ticient for approval.	
	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast.	or the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/were ado action was not required.	pted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were ado action was not required.	pted by the incorporators without shareholder action and shareholder	
05/14/2019 Dated		
Signature	Ja S. Ramos	
selected	rector, president or other officer – if directors or officers have not been , by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)	
	ALFA G RAMOS	
	(Typed or printed name of person signing)	
	PRESIDENT	
-	(Title of person signing)	

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