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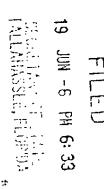
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COVER LETTER

Division of Corpor	rations		
NAME OF CORPOR.	ATION: Cambie	INWEAR305	
DOCUMENT NUMB	er: <u>P1900040</u>	494	
	f Amendment and fee are su		
Please return all corresp	oondence concerning this ma	tter to the following:	
-	SHIRL	Name of Contact Person	1
-		Firm/ Company	·
3401 NW 17TH AVE APT 714 Address			
-	MiAMi	City/ State and Zip Code	. <u>. </u>
E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
SHIB.	Cey Ruiz Contact Person	at (<u>407</u> Area Co	de & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department 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)
<u>Maili</u>	ing Address	Street .	Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

. :

TO: Amendment Section

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Colombiguear 305	
(Name of Corporation as current	tly filed with the Florida Dept. of State)
1000040494	
(Document Number of	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
name must be distinguishable and contain the word "corporation "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: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	3401 NW 17-14 AVE FRITI14 M. AM: FL 33142
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	3401 NW 17TH AUE APT 714 Miam: FL 33142
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address Name of New Registered Agent	
(Florida si	rreet address) G.
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familiar	
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	PT John E)oe	
X Remove	<u>V</u> <u>Mike J</u>	Jones \\	
_X Add	SV Sally S	Smith V	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			·
Remove			
6) Change			
Add			
Remove			

f amending or adding additional Art Attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
	MIN
	101
	
	
	
-	
an amendment provides for an excl	hange, reclassification, or cancellation of issued shares,
rovisions for implementing the ame (if not applicable, indicate N/A)	endment if not contained in the amendment itself:
(ij noi applicable, indicale N/A)	
	\ <u>\</u>
	N/X

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date <u>if applicable</u> :	
(no more than 90 days after an	nendment file date)
Note: If the date inserted in this block does not meet the applicable statutory document's effective date on the Department of State's records.	filing requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of vot by the shareholders was/were sufficient for approval.	tes cast for the amendment(s)
The amendment(s) was/were approved by the shareholders through voting gromust be separately provided for each voting group entitled to vote separately	
"The number of votes cast for the amendment(s) was/were sufficient for	approval
by(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareh action was not required.	older action and shareholder
The amendment(s) was/were adopted by the incorporators without shareholde action was not required.	er action and shareholder
Dated 5/29/2019	
Signature (By a director, president or other officer – if director	er or officers have not been
selected, by an incorporator — if in the hands of a rec	
appointed fiduciary by that fiduciary)	,
Sheden huz	<u></u>
(Typed or printed name of person	signing)
PRESIDENT	
(Title of person signi	ng)

. . . .