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Office Use Only



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FILED
2021 OCT-5 AMII: 30

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COVER LETTER

Division of Corpo	rations		
NAME OF CORPOR	ATION: GREAT	COUTURE FAS	HION INC.
	er: <u>P200000</u>		·
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	Angelina S	Name of Contact Person	nc. Dûste 230
	Great (CU	Firm/Company	mc.
	54015	Kirkman RJ.	And Suite 230
-	•	Address	
	Orlando	FL 32319 City/ State and Zip Cod	
•		City/ State and Zip Cod	c
	great cou	uture egmail	l-com
	E-mail address: (to be us	sed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
Angelina	Jordan	at (786	de & Daytime Telephone Number
Name o	f Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Dep.	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

TO: Amendment Section

Amendment Section Division of Corporations P.O. Box 6327 Street Address

Amendment Section
Division of Corporations
The Centre of Tallahassee

Articles of Amendment to Articles of Incorporation

FILED

of

GREAT COUTURE FASHION INC.

2021 OCT -5 AMIL: 30

(Name of Corporation as currently filed with the Florida Dept. of State)

P200 00028671

(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:

N/A		The ne
name must be distinguishable and contain the wo "Inc" or Co.," or the designation "Corp," "chartered." "professional association," or the	"Inc," or "Co". A professional corpo	porated" or the abbreviation "Corp.,
B. Enter new principal office address, if appl (Principal office address <u>MUST BE A STREE</u>)	TADDRESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)		
D. If amending the registered agent and/or renew registered agent and/or the new regis Name of New Registered Agent Ar	stered office address:	r the name of the N/A
	(Florida street address)	
New Registered Office Address:	(Florida street address) (City)	, Florida(Zip Code)
New Registered Office Address: New Registered Agent's Signature, if changing the description in the description of the descrip	(City)	(Zip Code)

Check if applicable

[☐] The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), F.S.

► 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 I	Joe	
X Remove	<u>V</u> <u>Mike .</u>	Jones	
X Add	SV Sally S	Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Z Change		Olga Melnychuk	5401 5 Kirkman PA
Add		•	ste 230
2) (125 al name)	(same)	(same porson) Angelina Jordan	Orlando, FL 32P19 (same)
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			·
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

ttach additional	dding additional Ar sheets, if necessary).	. (Be specific)	ge(s) here: N	' '	
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			.		
an amendment	provides for an exc	change, reclassific	ation, or cancell	ition of issued shar	res. N/A
	nplementing the amache, indicate N/A)	<u>iendment il not co</u>	ntained in the ai	<u>nendment itsell:</u>	7-7-
(1) 11.01 (1)	territe, marcust 20721)				
					

The date of one	N/M	if other than the
date this docum	th amendment(s) adoption:ent was signed.	, if other than the
Effective date j	f applicable:	
	(no more than 90 days after amendment file date)	
	ite inserted in this block does not meet the applicable statutory filing requirements, this date will retive date on the Department of State's records.	I not be listed as the
Adoption of A	mendment(s) (CHECK ONE)	
The amendm action was n	tent(s) was/were adopted by the incorporators, or board of directors without shareholder action and of required. (Angelina is the only employed at this firm)	l shareholder
☐ The amendm	hent(s) was/were adopted by the shareholders. The number of votes east for the amendment(s) holders was/were sufficient for approval.	
	cent(s) was/were approved by the shareholders through voting groups. The following statement arrately provided for each voting group entitled to vote separately on the amendment(s):	
N/A by	umber of votes cast for the amendment(s) was/were sufficient for approval	
оу <u></u>	(voting group)	
ø	Dated 10/1/21	
•	Signature Angelina Jordan	
	(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)	
	ANGELINA JORDAN	
	(Typed or printed name of person signing)	
	. President / Owner	
	(Title of person signing)	