## P200000 50305

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## COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: Kulture Apparel In	c	
	BER: P20000050305		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	Ayoub Zaki		
		Name of Contact Person	
	Kulture Apparel Inc		
		Firm/ Company	
	2319 N Congress Ave Ste 15		
		Address	
	Boynton Beach, FL 33426		
•		City/ State and Zip Code	
		16.6.	and Grand and Alband
	h-mail address: (to be us	ed for future annual report	notification)
For further information	n concerning this matter, pleas	se call:	
Ayoub Zaki		at (	)
Name o	of Contact Person	Area Coo	lc & Daytime Telephone Number
Enclosed is a check for	r the following amount made	payable to the Florida Depa	rtment of State:
S35 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		Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	

## Articles of Amendment

Articles of Incorporation	
Kulture Apparel Inc	
(Name of Corporation as currently filed with the Florida Dept. of State)	
P20000050305	
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the folloits Articles of Incorporation:	owing amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbrev "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must co "chartered," "professional association," or the abbreviation "P.A."	viation "Corp.,"
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	20/0
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:	ਹੋ: ਨੂੰ ਯ
Name of New Registered Agent	—- 
(Florida street address)	
New Registered Office Address:, Florida, 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 positi	ion.
Signature of New Registered Agent, if changing	
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.

X_Change	$\overline{\text{b.t.}}$	John Doe		
X Remove	<u>V</u>	Mike Jon	<u>cs</u>	
X Add	<u>sv</u>	Sally Smi	i <u>th</u>	
Type of Action (Check One)	<u>Title</u>	<u>1</u>	<u>Name</u>	<u>Addres</u> s
i) Change	VP		Hassane Mammou	10854 Miller Rd
Add				Indianapolis, IN 46231
X Remove				
2) Change				
Add				
Remove 3) Change			<u></u>	
Add				
Remove				
4) Change		· _		
Add				
Remove				
.5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

Attach additional sheets, if necessary).	(Re specific)				
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an amendment provides for an exc	change, reclassifica	tion, or cancellat	tion of issue <u>d sha</u>	res,	
provisions for implementing the am	endment if not cor	itained in the am	endment itself:		
(if not applicable, indicate N/A)					
		· · · · · · · · · · · · · · · · · ·			
			*********		<del></del>
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	August 4, 2020	
The date of each amendment(s date this document was signed.	e) adoption:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in the document's effective date on the	is block does not meet the applicable statutory filing requirements, this Department of State's records.	s date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors without shareholder	action and shareholder
The amendment(s) was/were by the shareholders was/wer	adopted by the shareholders. The number of votes east for the amendme sufficient for approval.	ent(s)
	approved by the shareholders through voting groups. The following sta for each voting group entitled to vote separately on the amendment(s):	<i>lement</i>
"The number of votes of	cast for the amendment(s) was/were sufficient for approval	
by	(voling group)	
	(voting group)	
August Dated	4, 2020	
Signature	2 Mars	
(By	a director, president or other officer – if directors or officers have not be exted, by an incorporator – if in the hands of a receiver, trustee, or other ointed fiduciary by that fiduciary)	
	Ayoub Zaki	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	