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DATE: 1/7/2021

NAME: DESIGNS BY INC.

TYPE OF FILING: RESTATED ARTICLES

COST: 35.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL HODGE

COVER LETTER

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

SUBJECT: DESIG	SNSBY INC.		
30BJEC1		DRPORATE NAME	
Enclosed are an original	and one (1) copy of the res	stated articles of incorpora	ation and a check fo
Filing Fee Fi	\$43.75 iling Fee Certificate of Status	□ \$43.75 Filing Fee & Certified Copy	☐ \$52.50 Filing Fee, Certified Copy & Certificate of Status
		ADDITIONAL CO	PY REQUIRED
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1744	N. Belcher Ro	oad Suite 150	
		Address	
Clea	irwater, FL 337	61	
	City,	State & Zip	
727-	415-7453		
	Daytime T	elephone number	
lbarr	on@designsby	v.co.uk	

NOTE: Please provide the original and one copy of the document.

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

RESTATED ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME The name of the corporation is: Designs By Inc.	
ARTICLE II RESTATEDARTICLES The text of the Restated Articles is as follows: The Principal Office is	
6891 102nd Avenue, Pinellas Park, Florida 33782	
	20 Z21
	<u> </u>
	S 8
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· ARTICLE III OFFICERS AND/OR DIRECTORS (optional)

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	<u>PT</u>	John D	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	<u>ones</u>	
X Add	<u>sv</u>	<u>Sally S</u>	<u>mith</u>	
Type of Action (Check One)	Title		<u>Name</u>	Address
1) X Change	PD	_	Leigh Barron	6891 102nd Avenue, Pinellas Park, Florida 33782
Add				
Remove				
2) Change		_		
Add				
Remove				
3) Change				2021
Add				20 5 11
Remove				
4) Change		_		公宝!
Add				
Remove				. &
5) Change				
Add				
Remove				
6) Change		_		
Add				
Remove				

ARTICLE IV AMENDED REGISTERED A	<u>IGENT (OPTIONAL)</u>	
The <u>name and Florida street address</u> (P.O. I	Box NOT acceptable) of the registered	lagent is:
Name:		
Address:		
		
Having been named as registered agent to acc certificate, I am familiar with and accept the		tated corporation at the place designated in the agree to act in this capacity
Required Signature	c/Registered Agent	Date
ARTICLE VI ARTICLE CONSOLIDATION	<u>on</u>	
These restated articles of incorpo	oration consolidate all amendm	nents into a single document;
ARTICLE VII REQUIRED ADOPTION	<u>INFORMATION</u>	
Check if applicable:		
The amendment(s) is/are being file	ed pursuant to s. 607.0120(11)	o€, F.S.
The date of each amendment(s) add if other than the date this document is		
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adoptaction and shareholder action was not		ard of director without shareholder
The amendment(s) was/were adopted amendment(s) by the shareholder was	•	number of votes cast for the
The amendment(s) was/were approstatement must be separately provided amendment(s).		
"The number of votes cast for the	e amendment was/were sufficie	ent for approval by
(voting	g group)	

ARTICLE VIII EFFL	ECTIVE DATE:
Effective date, if other t	han the date of filing: (OPTIONAL)
(If an effective date is l	isted, the date must be specific and cannot be more than 90 days after the filing.)
	ed in this block does not meet the applicable statutory filing requirements, this date will not be listed as date on the Department of State's records.
	and affirm that the facts stated herein are true. I am aware that the false information submitted in a nent of State constitutes a third degree felony as provided for in s.817.155, F.S.
Date	d: 1/6/2021
Sign	ature: Leigh Barron (By a director, president or other officer - if directors or officers
C	(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)
	Leigh Barron
	(Typed or printed name of person signing)
	President

(Title of person signing)