P21000052615

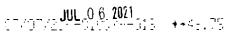
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	ORATION: Boss Babe Design	s, Inc.	
	MBER: P21000052615		
The enclosed Article	es of Amendment and fee are su	ibmitted for filing.	
Please return all cor	respondence concerning this ma	atter to the following:	
	Stephanie Suarez		
		Name of Contact Person	n
	Boss Babe Designs, Inc.		
		Firm/ Company	
	840 West 41st Street, Suite 2	109	
		Address	
	Miami Beach, Florida 33140	ı	
		City/ State and Zip Cod	e
	stephanie@karmasnack.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further informat	ion concerning this matter, plea	se call:	
Stephanie Suarez		at (<u>844</u>	
Name	e of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check	for the following amount made	payable to the Florida Depa	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
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 of

Boss Babe Designs, Inc.			
(Name of Corporation as curre	ntly filed with the Fl	orida Dept. of State)	
P21000052615	_		
(Document Number	of Corporation (if ki	nown)	
Pursuant to the provisions of section 607.1006 . Florida Statutes, thits Articles of Incorporation:	is <i>Florida Profit Cor</i>	poration adopts the fo	llowing amendmer
A. If amending name, enter the new name of the corporation:			
			The new
name must be distinguishable and contain the word "corporation." "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". "chartered," "professional association," or the abbreviation "P.A	A professional corr	prporated" or the abbi poration name must	uminting "C"
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)			
			
	-		
Enter new mailing address, if applicable:		-	
(Mailing address MAY BE A POST OFFICE BOX)		······································	
			50
D. If amending the registered agent and/or registered office ad	dress in Florida, ent	er the name of the	· <u> </u>
new registered agent and/or the new registered office addre	SS:		
Name of New Registered Agent			
(Florida s	treet address)		
New Registered Office Address:		, Florida	
	(City)		(Zip Code)

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e). 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	<u>PT</u> <u>John</u>	n Doe	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
X Add	<u>SV</u> <u>Sall</u>	y <u>Smith</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	P	Eric Rosado	840 West 41st Street
Add			Suite 209
X Remove			Miami Beach, Florida 33140
2) Change	P	Stephanie Suarez	840 West 41st Street
X Add			Suite 209
Remove 3) Change	<u> </u>		Miami Beach, Florida 33140
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change	-		
Add			
Remove			

				
				
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		. <u>.</u>		
an amendment provides for an eyeh:	nue, reclassificatio	n or cancellation .	of iccord above	
an amendment provides for an excharovisions for implementing the amen	dment if not contai	ned in the amend	nont it alfa	
(if not applicable, indicate N/A)	direct it not contai	nea in the amenu	nem usen:	
				
		-	<u> </u>	
				
				
				
		-		

The date of each amendment(s) adoption: 6.30-2 if other than the date this document was signed.
Effective date if applicable:
(no more than 90 days after amendment file date)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s): "The number of votes cast for the amendment(s) was/were sufficient for approval
by
(voting group)
Dated6 - 30 - 21
Signature (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 rustee, or other court appointed fiduciary by that fiduciary)
(Typed or printed name of person signing)
President Printed Hainty of person signing)
(Title of person signing)