P21000068576

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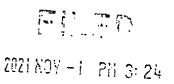
COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: CEST L'AMOUR	VISIONS BY JACKELIN	E, INC		
DOCUMENT NUMB	ER: P21000068576				
The enclosed Articles of	of Amendment and fee are su	ibmitted for filing.			
Please return all corres	ondence concerning this ma	atter to the following:			
		Jackeline Saldarriaga			
-		Name of Contact Persor	1		
	C'EST L'AMO	UR VISIONS BY JACKEI	JNE, INC		
-	<u>_</u>	Firm/ Company	· · · · · · · · · · · · · · · · · · ·		
	251 Valencia Ave. Ste 942				
-	Address				
	Coral Gables, FL 33114				
-		City/ State and Zip Code	e		
		rsosa@sosacpa.com			
-	E-mail address: (to be us	sed for future annual report	notification)		
For further information	concerning this matter, plea-	se call:			
Jackeline Saldarriaga		305 at (442-7672		
Name of Contact Person			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	S43.75 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 of



C'EST L'AMOUR VISIONS BY JACKELINE, INC.

CEST L'AMOUR VISIONS B	٠٠٠٠ ٠٠٠ سه سائم لن سن ن
	tly filed with the Florida Dept. of State)
P210000685	
(Document Number of	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this ts Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporation:	
ZALINS by Jackeline Saldarriaga Event Planne	ers, Inc 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 corporation name must contain the word
3. Enter new principal office address, if applicable:	n/a
Principal office address <u>MUST BE A STREET ADDRESS</u>)	
Enter new mailing address, if applicable:	n/a
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	<u></u>
). If amending the registered agent and/or registered office add	trees in Florida, enter the name of the
new registered agent and/or the new registered office address	
Name of New Registered Agent	
Name of New Registered ligen	
(Florida st	reet address)
N. B. C. LOSS (1)	Physida
New Registered Office Address:	, Florida (City) (Zip Code)
	(с пу) — — ггір с оде)
iew Registered Agent's Signature, if changing Registered Agent	r
hereby accept the appointment as registered agent.—I am familiar	
Signature of New Ic	Registered Agent, if changing
ingitiate of iven is	agmered agent germaging

Check if applicable

☐ 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)

Example:

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	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
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 add i Attach <i>additional sh</i>	eets, if necessary).	(Be specific)				
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fan amendment pr	rovides for an exch	ange, reclassifica	tion, or cancella	tion of issued	shares,	
provisions for impl	lementing the ame	ndment if not con	tained in the an	<u>nendment itsel</u>	<u>f:</u>	
(if not applicab	le, indicate N/A)					
						<u> </u>
<u> </u>					<u> </u>	·
					_	
						

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The date of each amendment(s) ado	ption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file d	ate)
Note: If the date inserted in this blod document's effective date on the Depa	ck does not meet the applicable statutory filing requirement of State's records.	nents, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were adopt action was not required.	ed by the incorporators, or board of directors without sha	reholder action and shareholder
The amendment(s) was/were adopt by the shareholders was/were suff	ed by the shareholders. The number of votes cast for the cient for approval.	amendment(s)
☐ The amendment(s) was/were appromust be separately provided for ea	ved by the shareholders through voting groups. The followch voting group entitled to vote separately on the amenda	wing statement nent(s):
"The number of votes cast fo	r the amendment(s) was/were sufficient for approval	
by	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	(voting group)	
09/20/202 Dated(
selected.	president or other officer – if directors or officers ha by an incorporator – if in the hands of a receiver, trustee, fiduciary by that fiduciary)	
	(Typed or printed name of person signing)	
	President President	
_	(Title of person signing)	