# P950000lo0393

(Requestor's Name)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
,
Certificates of Status
Special Instructions to Filing Officer:

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CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 236900 4311863

AUTHORIZATION

COST LIMIT : 5 43.75

ORDER DATE: March 20, 2020

ORDER TIME : 2:37 PM

ORDER NO. : 236900-010

CUSTOMER NO: 4311863

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### DOMESTIC AMENDMENT FILING

NAME: MCB SPORTSWEAR, INC.

EFFECTIVE DATE:

XX ARTICLES OF AMENDMENT
RESTATED ARTICLES OF INCORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY
PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Amanda Robinson -- EXT# 62980

EXAMINER'S INITIALS:

# **COVER LETTER**

TO: Amendment Section
Division of Corporations

NAME OF CORPO	ORATION: MCB Sportswear,	Inc.			
DOCUMENT NUM	P05000060303				
The enclosed Article	s of Amendment and fee are su	bmitted for filing.			
Please return all corr	espondence concerning this ma	tter to the following:			
	Ivy M. Shapiro, Paralegal				
		Name of Contact Persor	ì		
	Blank Rome LLP				
		Firm/ Company	· · · · · · · · · · · · · · · · · · ·		
	One Logan Square				
	<del></del>	Address			
	Philadelphia, PA 19103				
	City/ State and Zip Code				
	Bennett@mcbgroup.net				
	E-mail address: (to be us	ed for future annual report	notification)		
For further informati	on concerning this matter, pleas	se call:			
Ivy M. Shapiro		at ( <sup>215</sup>	569-5784		
Name 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:		
S35 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)		
· · · · · · · · · · · · · · · · · · ·	ailing Address	· · · · · · · · · · · · · · · · · · ·	Address		
Amendment Section Amendment Section Division of Corporations Division of Corporations					
	D. Box 6327		entre of Tallahassee		
Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810					

Tallahassee, FL 32303

### Articles of Amendment to Articles of Incorporation of

## MCB SPORTSWEAR, INC.

(Name o	f Corporation as current	ly filed with the Florida Dept. of Sta	te)		
MCB Sportswear, Inc.					
	(Document Number of	of Corporation (if known)			
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit Corporation adopts the	: following	g amei	ndment(s) t
A. If amending name, enter the new na	me of the corporation:				
Not Applicable					печ.
name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association,"	Corp," "Inc," or "Co".	A professional corporation name mu	bbreviatio ist contail	n "Co n the	rp.," word
• -		445 Shady Lane, Suite 100			
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		Huntingdon Valley, PA 19006			<del></del>
			<u> </u>	<u></u>	
			71.	บิวข	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		445 Shady Lane, Suite 100	AHE HENDE	KAR	<b>"</b> :
(Munics and ess Mills DD 14.1 Cox.	<u> </u>	Huntingdon Valley, PA 19006	738 738	20	
			- η · · · · · · · · · · · · · · · · · ·	AH	
			윘	فخ	<del>_</del> ;
D. If amending the registered agent an	d/or registered office address	dress in Florida, enter the name of th	iē⊖.	<u>7</u> 2	
new registered agent and/or the new	Corporation Service Co				
Name of New Registered Agent	<del></del>		_	_	
	1201 Hays Street			_	
	(Florida s	treet address)	32301		
New Registered Office Address:	I dildildssee	(City), Florid	la	Code)	—
		(City)	(Lip	0040)	
New Registered Agent's Signature, if of I hereby accept the appointment as registered.	hanging Registered Ager tered agent. I am familian	nt: with and accept the obligations of the	position.		
Guanda	. E. Clumen	Amanda Robinson, Asst. Vice P	<sup>1</sup> resident	ŗ	
<u> </u>		Registered Agent, if changing		_	
		G			

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)

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 Doe</u>	
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 22
1) Change		Not Applicable	2020 HAR 20 SECRETAR TALLAHASS
Add			
Remove			## ## ## ## ## ## ## ## ## ## ## ## ##
2) Change			# 9: 23
Add			D <sub>m</sub>
Remove 3) Change			
Add			
Remove			
4) Change		_	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

<ul> <li>If amending or adding additional Article (Attach additional sheets, if pecessary).</li> </ul>	(Be specific)		
Not Applicable			
		<del> </del>	<del></del>
·-			
· · · · · · · · · · · · · · · · · · ·			
		F <sub>S</sub>	
			2029 -
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If an amandment provides for an eval	nange, reclassification, or cancellation of issued shares,	, <del></del> ,	<i>. !</i>
provisions for implementing the ame	adment if not contained in the amendment itself:	STA 1028	
(if not applicable, indicate N/A)		- 5일 V	
lot Applicable		~ <b>U</b>	
	· · · · · · · · · · · · · · · · · · ·		
			<del></del>

March 19, 2020			, if other than the
The date of each amendment(s) adoption:date this document was signed.		_	_, ou.v
Effective date if applicable:			
(no more than 90 days after amendment file date	e)		
Note: If the date inserted in this block does not meet the applicable statutory filing requirement document's effective date on the Department of State's records.	nts, this da	te will	not be listed as the
Adoption of Amendment(s) (CHECK ONE)			
The amendment(s) was/were adopted by the incorporators, or board of directors without sharel action was not required.	holder actio	on and s	shareholder
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the are by the shareholders was/were sufficient for approval.	nendment(	s)	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The follow must be separately provided for each voting group entitled to vote separately on the amendment	ing stateme ent(s):	ent	
"The number of votes cast for the amendment(s) was/were sufficient for approval	SECRI	2020 HAR	···.
(voting group)	TARY TASSEI	IR 20	ŗ.,
March 19, 2020  Dated  Signature	U STATE E FLORIDA	AH 9: 23	
(By a director, president or other officer – if directors or officers have selected, by an incorporator – if in the hands of a receiver, trustee, or appointed fiduciary by that fiduciary)	e not been r other com	1	_
Bennett Oltman			
(Typed or printed name of person signing)		-	
President			
(Title of person signing)			<del></del>