NO500012427

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	ocument Number)	
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JAN 8 2016 C. CARROTHERS

COVER LETTER

Division of Corporations
NAME OF CORPORATION: BEAUTY OF HUMANITY, INC.
DOCUMENT NUMBER: NOSOOO12427
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
SHEIKH I AHMAD
(Name of Contact Person)
BEAUTY OF HUMANITY, INC. (Firm/ Company)
P.O. BOX 410407
(Address)
MELBOURNE, FL 32941-0407 (City/ State and Zip Code)
(City/ State and Zip Code)
Shoikh. ijaz. ahmad @ gmail. Com Amail andress: (to be used for future argual report notification)
g-mail address: (to be used for future amorual report notification)
For further information concerning this matter, please call:
SHEIKH I AHMA-D at (321) 674 - 9857 (Name of Contact Person) (Area Code) (Daytime Telephone Number)
(Name of Contact Person) (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee \$\Bigsquare \text{\$\sqrt{\$\sqrt{\sq}}}}}}}} \sqrt{\sq}}}}}}}}}} \sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sq}}}}}}}}} \sqrt{\sq}}}}}}}}}} \sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\

Mailing Address

TO: Amendment Section

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

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Enclosed)

Articles of Amendment to Articles of Incorporation of

BEAUTY OF HUMANITY		uida Dane af Ceae	
(Name of Corporation as o	currently filed with the Flo	rida Dept. of State)	
N05000	12427		351
(Document	Number of Corporation (if k	(nown)	基語
Pursuant to the provisions of section 617.1006, Florida mendment(s) to its Articles of Incorporation:	Statutes, this Florida Not Fo	or Profit Corporation adopts the	followin
•			TA TA
s. If amending name, enter the new name of the con	rporation:		COR.
ame must be distinguishable and contain the word "co	orporation" or "incorporate	d" or the abbreviation "Corp."	The nev
Company" or "Co." may not be used in the name.		•	
B. Enter new principal office address, if applicable:			
Principal office address <u>MUST BE A STREET ADD</u>	<u>RESS</u>)		
. Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX	<u> </u>		
		<u> </u>	
. If amending the registered agent and/or registere	ed office address in Florida	, enter the name of the	
new registered agent and/or the new registered of		,	
Name of New Registered Agent:			
name of their regimered rigen.	·		•
_		lorida street address)	
New Registered Office Address:	,•	arrance are or consecutly	
		Elorido	
	(City)	, Florida (Zip Code)	
	- -		
ew Registered Agent's Signature, if changing Regi- hereby accept the appointment as registered agent. I		t the obligations of the position	
петегу иссері те прротитет из гезімегей азет. 1	ит затишт жип или ассерг	i me ovuganons oj me position.	
	Signature of New Regis	tered Agent, if changing	

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 X Remove X Add	<u>V</u> <u>Mik</u>	n Doe ce Jones ly Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u> s
1) Change Add Remove	<u>S'</u>	SHAKEEL SAROSH	PO BOX 210131 MILWAUKEE, WI 53221-8003
2) Change Add Remove	<u>S</u> _	MUKHTAR H. KHAN	5479 SHEFFIELD COURT, APT. 252 ALEXANDRIA, VA2231
3) Change Add Remove			
4) Change Add Remove			
5) Change Add			
Remove 6) Change Add			
Damoua			

Page 2 of 4

The date of each amendment(s) adoption:	, if other than th
date this document was signed.	
Effective date if applicable: JANUARY 1, 2016 (no more than 90 days after amendment file date)	
(no more man 50 days after amenament file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date document's effective date on the Department of State's records.	ite will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the members and the number of votes cast for the amendm was/were sufficient for approval.	nent(s)
There are no members or members entitled to vote on the amendment(s). The amendment(s) was/v adopted by the board of directors.	vere
Dated DECEMBER 30, 2015	
Signature Durin	
(By the chairman or vice chairman of the board, president or other officer-if dire have not been selected, by an incorporator – if in the hands of a receiver, trusted other court appointed fiduciary by that fiduciary)	
SHEIKH I AHMAD	
(Typed or printed name of person signing) CHAIRMAN	
(Title of person signing)	
(Title of person signing)	