## P01000034441

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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: BEAUTIFUL SKI	IN, INC		
DOCUMENT NUMBER: P07000036441			
The enclosed Articles of Amendment and fee are su	ibmitted for filing.		
Please return all correspondence concerning this ma	utter to the following:		
JENNIFER VARRAUX			
	Name of Contact Person	1	
<del></del>	Firm/ Company		
14308 MOON FLOWER DI	2		
	Address		
TAMPA, FL 33626			
	City/ State and Zip Cod	E	
JENVARRAUX@YAHOO.COM			
E-mail address: (to be u	sed for future annual report	notification)	
For further information concerning this matter, please	se call:		
JENNIFER VARRAUX	at ( <sup>813</sup>	389-9436	
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:	
\$35 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)	
Malling Address	Street	Address	
Amendment Section	· · · · · · · · · · · · · · · · · · ·	ment Section	
Division of Corporations		Division of Corporations Clifton Building	
P.O. Box 6327 Tallahassee, FL 32314		xecutive Center Circle	

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

(2) (4.2)	T OF 1 11 11 11 11 11 11 11 11 11 11 11 11	`	
(Name of Corporation as current P07000036441	ly filed with the Florida Dept. of State	)	
	of Corporation (if known)		
(Document Number (	or Corporation (it known)		
ursuant to the provisions of section 607.1006, Florida Statutes, this Articles of Incorporation:	s Florida Profit Corporation adopts the	following amendment(s	
A. If amending name, enter the new name of the corporation:			
BEAUTIFUL SKIN BY JEN, INC		The new	
name must be distinguishable and contain the word "corporatio "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation nam	r the abbreviation	
3. Enter new principal office address, if applicable:	14308 MOON FLOWER DR		
Principal office address <u>MUST BE A STREET ADDRESS</u> )	TAMPA, FL 33626		
		700 9	
Enter new malling address, if applicable:		<u> </u>	
(Mailing address MAY BE A POST OFFICE BOX)			
	<del></del>		
		?	
		STEE OF	
<ol> <li>If amending the registered agent and/or registered office add new registered agent and/or the new registered of fice addres</li> </ol>			
new respective agents and yet agent respective of the sources	<b>3.</b>		
Name of New Registered Agent			
	reet address)		
(Pioriaa si			
New Registered Office Address:	, Florida_	(Ztp Code)	

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 Doe	
X Remove	Y	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	<del></del>		
Add			
Remove			
6) Change			
Add			
Remove			

	ng additional Artests, if necessary).	(Be specific)	<del></del>		
<del></del>					
		<del></del>			
				<u></u>	
		_			
an amendment provisions for imple (if not applicable	ovides for an exc ementing the ame le, indicate N/A)	nange, reclassific endment if not co	ation, or cancell ontained in the a	ation of issued shi nendment itself:	ares.
<del></del>			<del></del>		
					<del></del>
				<del></del>	

The date of each amendment(s) adoption:	, if other than th
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 we document's effective date on the Department of State's records.	vill not be listed as th
Adoption of Amendment(s) (CHECK ONE)	
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)	
(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 10-11-16	
Signature Vanceuso	
(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)	
Jennifer Varraux	
(Typed or printed name of person signing)	-
President	
(Title of person signing)	