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SECRETARY OF STATE
FALLAHASSEE PH OR IDA

wellow.

COVER LETTER

TO: Amendment Section - Division of Corporations

NAME OF CORPORATION:		Nicole Brigandi Hair Design Inc
DOCUMENT NUMBER:		P08000006850
The enclosed Artic	les of Amendment and fo	ee are submitted for filing.
Please return all co	rrespondence concerning	this matter to the following:
		Lawrence Swan
		Name of Contact Person
_	Calooseha	tche Tax & Financial Services Inc
		Firm/ Company
	70	9 Cape Coral Pkwy West
		Address
	,	Cape Coral FL 33914
· ·		City/ State and Zip Code
	lawi E-mail address: (to be	ence.swan@ctfs.us used for future annual report notification)
For further informa	ation concerning this mat	ter, please call:
L	awrence Swan	at (239) 540-2612
Name	of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check	for the following amount	nt made payable to the Florida Department of State:
☑ \$35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & S52.50 Filing Fee Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed)
Mailing Ad Amendmen Division of P.O. Box 63 Tallahassee	t Section Corporations 327	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to **Articles of Incorporation** of

Nicole Brigar	ndi Hair Design Inc 🗸		
(Name of Corporation as curren	<u>itly filed with the Florida De</u>	pt. of State)	
P080	00006850		
(Document Numb	per of Corporation (if known)		
Pursuant to the provisions of section 607.1006 amendment(s) to its Articles of Incorporation:	, Florida Statutes, this <i>Florid</i>	a Profit Corporation ac	lopts the following
A. If amending name, enter the new name of	the corporation:		
Nicole Bud	ay Hair Design Inc		The new
abbreviation "Corp.," "Inc.," or Co.," or the a name must contain the word "chartered," "profest. B. Enter new principal office address, if application of the address MUST BE A STREET. C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	essional association," or the dicable: <u>CADDRESS</u>)		FILED 10 JUN -7 PH 1: 35 SECTATIANY OF STATE FALLAHASSEE; FILORIBA
D. If amending the registered agent and/or renew registered agent and/or the new registered		orida, enter the name of	<u>f the</u>
Name of New Registered Agent:			
New Registered Office Address:	(Florida street addre		
-	(0)	, Florida	
	(City)	(Zip Code)	

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered 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)

<u>Title</u>	<u>Name</u>	Address	Type of Action
	<u></u>		
			☐ Add ☐ Remove
	nding or adding additional Arti additional sheets, if necessary).		
provis		hange, reclassification, or cancellandment if not contained in the am	

The date of each amendment	(s) adoption: (date of adoption is required)
Effective date if applicable:	(unit of adoption is required)
-	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/wer by the shareholders was/we	re adopted by the shareholders. The number of votes cast for the amendment(s) are sufficient for approval.
	re approved by the shareholders through voting groups. The following statemen d 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)
The amendment(s) was/wer action was not required.	re adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/wer action was not required.	re adopted by the incorporators without shareholder action and shareholder
Dated_6/1/2	2010
Signature	a director, president or other officer - if directors or officers have not been
sele	cted, by an incorporator – if in the hands of a receiver, trustee, or other court ointed fiduciary by that fiduciary)
	Nicole Buday
	(Typed or printed name of person signing)
	President
	(Title of person signing)