P100000 80030

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10/9/14

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Nahua Ski DOCUMENT NUMBER: P1000008003	n Care, Inc	
DOCUMENT NUMBER: 1 1000000000		
The enclosed Articles of Amendment and fee are st	ubmitted for filing.	
Please return all correspondence concerning this ma	atter to the following:	
Barbara Lavende	er	
	Name of Contact Person	1
Nahua Skin Care	e Inc	
-	Firm/ Company	
139 Chesapeake	e Ave	
	Address	
Tampa, Fl. 3360	6	
	City/ State and Zip Code	e
fladunkin@aolcom		
E-mail address: (to be u	sed for future annual report	notification)
For further information concerning this matter, plea	ise call:	
Barbara Lavender	at (813	431-7175
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)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section on of Corporations Building xecutive Center Circle

Articles of Amendment to Articles of Incorporation

FILED.

2014 OCT - I PM 3: 44 Nahua Skin Care, Inc (Name of Corporation as currently filed with the Florida Dept. of State)) BECTEVARY OF STATE TALLAHASSEE, FLORIDA P10000080030 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: doUdigi, Inc name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." N/A B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: N/A (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: Florida 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)

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 Do	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sr	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
1) Change		_		
Add				
Remove				
2) Change		<u> </u>		
Add				
Remove				
3) Change		_		
Add				
Remove				
4) Change	<u></u>			
Add				
Remove				
5) Change				
Add				
Remove				
6) L Change		_		,
Add				the state of the s
Remove				

	nding or adding a additional sheets,	if necessary).	(Be specific)			
/A			• •			
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f an a	mendment provid	les for an excha	ınge, reclassific	ation, or cancel	lation of issued st	iares,
provis	sions for impleme	nting the amen	dment if not co	ntained in the a	mendment itself;	
(į	f not applicable, ir	ndicate N/A)				
Α						
-						

ffective date <u>if applicable</u> :	
	(no more than 90 days after amendment file date)
option of Amendment(s)	(CHECK ONE)
The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.
	proved by the shareholders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s):
"The number of votes cas	for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
The amendment(s) was/were ad action was not required.	opted by the board of directors without shareholder action and shareholder
The amendment(s) was/were ad action was not required.	opted by the incorporators without shareholder action and shareholder
Dated9_	25-14
Signature	wland and
	lirector, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court
	ited fiduciary by that fiduciary)
	Barbara A. Lavender
	(Typed or printed name of person signing)
	President
	(Title of person signing)