

P/5000079211

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

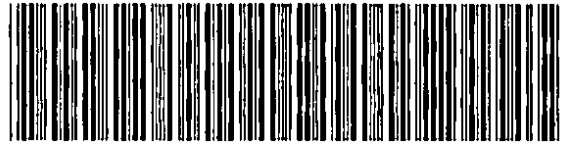
(Document Number)

Certified Copies _____ Certificates of Status _____

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STATE
TALLAHASSEE, FL

2019 MAR - 1 PM 6:51

FILED

G. PRATHE

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Rise Hair Salon

DOCUMENT NUMBER: P15000079211

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Becky Kelly
Name of Contact Person

The Nichols Group P.A.
Firm/ Company

1635 Eagle Harbor Parkway Ste 4
Address

Fleming Island, FL 32003
City/ State and Zip Code

brooksville@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Melissa Venis-Brooks at 904 333 1895
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:

- | | | | |
|--|--|--|--|
| <input type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input checked="" type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$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

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 16, 2019

BECKY KELLY
THE NICHOLS GROUP P.A.
1635 EAGLE HARBOR PARKWAY., STE 4
FLEMING ISLAND, FL 32003

SUBJECT: GRACIOUS BEAUTY BAR INC
Ref. Number: P15000079211

We have received your document for GRACIOUS BEAUTY BAR INC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6900.

Stacy Prather
Regulatory Specialist III

Letter Number: 619A00003383

2019 FEB 16 10:31

Articles of Amendment
to
Articles of Incorporation
of

Gracious Beauty Bar Inc

(Name of Corporation as currently filed with the Florida Dept. of State)

P15000079211

(Document Number of Corporation (if known))

FILED
2019 MAR - 1 PM 6:51
SECRETARY OF STATE
FLORIDA

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:

Rise Hair Salon Inc.

The new 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."

B. Enter new principal office address, if applicable:

(Principal office address **MUST BE A STREET ADDRESS**)

1021 Oak St

Suite 113

Jacksonville, FL 32004

C. Enter new mailing address, if applicable:

(Mailing address **MAY BE A POST OFFICE BOX**)

1423 Menna St

Jacksonville, FL 32205

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

(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, & 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 P,ST 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:

<u>X</u> Change	<u>PT</u>	<u>John Doe</u>
<u>X</u> Remove	<u>V</u>	<u>Mike Jones</u>
<u>X</u> Add	<u>SV</u>	<u>Sally Smith</u>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <u>Change</u>	_____	_____	_____
<u>Add</u>	_____	_____	_____
<u>Remove</u>	_____	_____	_____
2) <u>Change</u>	_____	_____	_____
<u>Add</u>	_____	_____	_____
<u>Remove</u>	_____	_____	_____
3) <u>Change</u>	_____	_____	_____
<u>Add</u>	_____	_____	_____
<u>Remove</u>	_____	_____	_____
4) <u>Change</u>	_____	_____	_____
<u>Add</u>	_____	_____	_____
<u>Remove</u>	_____	_____	_____
5) <u>Change</u>	_____	_____	_____
<u>Add</u>	_____	_____	_____
<u>Remove</u>	_____	_____	_____
6) <u>Change</u>	_____	_____	_____
<u>Add</u>	_____	_____	_____
<u>Remove</u>	_____	_____	_____

(Attach additional sheets, if necessary). (Be specific)

(if not applicable, indicate N/A)

The date of each amendment(s) adoption: _____, if other than 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 will not be listed as document's effective date on the Department of State's records.

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)

☐ 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 2/5/19

Signature Melissa Venis Brooks

(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)

Melissa Venis-Brooks

(Typed or printed name of person signing)

President

(Title of person signing)