P20 0000 53652

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

Office Use Only



800349048318

RECEIVED

JUL 2 7 2020

07/28/30--01010--022 **35.00

SEP 21 -J

029 JUL 27 AHII: 58

COVER LETTER

TO: Amendment Section

Division of Corporations NAME OF CORPORATION: NOUKY'S BEAUTY SUPPLY INC DOCUMENT NUMBER: P20000053652 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: MANOUCHEKA FAVARD Name of Contact Person Firm/ Company Address 1458 NW LEONARDO CIR, PORT ST LUCIE, FL 34986 City/ State and Zip Code manoufavard28@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (561 - 584) 584-2661

Area Code & Daytime Telephone Number MANOUCHEKA FAVARD Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: S35 Filing Fee □\$43.75 Filing Fee & ☐\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Mailing Address Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

Articles of Amendment to Articles of Incorporation of

to

NOUKI'S BEAUTY SUPPLY INC

(Name of Corporation as currently	filed with the Florida Dept. of State)
P20000053652	
(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>I</i> its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s
A. If amending name, enter the new name of the corporation:	
NOUKY'S BEAUTY SUPPLY INC	The new
name must be distinguishable and contain the word "corporation," "c "lnc.," or Co.," or the designation "Corp," "Inc," or "Co". A "chartered," "professional association," or the abbreviation "P.A."	ompany," or "incorporated" or the abbreviation "Corp"
B. Enter new principal office address, if applicable:	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	27
	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	· : œ
· · · · · · · · · · · · · · · · · · ·	
	· · ·
D. If amending the registered agent and/or registered office addr	ess in Florida, enter the name of the
new registered agent and/or the new registered office address:	
Name of New Registered Agent	
(Florida stre	et address)
New Registered Office Address:	, Florida
	City) (Zip Code)
Name Description and Assembly Classical Conference (C. J. C. D. C. D. C. D. C. C. D. C. C. D. C. C. D. C.	
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar w	ith and accept the obligations of the position.
- · ·	
Signature of New De	gistered Agent, if changing
Signature of New Re	concrea Agent, if enunging

Check if applicable

The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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	PT	John Doc	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	·		
Add			
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4)Change		_	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	tles, enter change(s) here: (Be specific)	
	_	
· · · · · · · · · · · · · · · · · · ·		
		-
		<u> </u>
		-
···		
		
f an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	nge, reclassification, or cancel dment if not contained in the a	lation of issued shares, amendment itself:
1		
		
. <u>-</u>		

The date of each amendment(s) adoption:	, if other than the
Effective date if applicable:	
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 document's effective date on the Department of State's records.	ate will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder act action was not required.	ion and shareholder
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment by the shareholders was/were sufficient for approval.	(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statem must be separately provided for each voting group entitled to vote separately on the amendment(s):	ient
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by (voting group)	
Signature (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 con appointed fiduciary by that fiduciary) MANOUCHEKA FAVARD (Typed or printed name of person signing)	ırt
PRESIDENT	
(Title of person signing)	