P18000094641

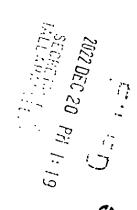
(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
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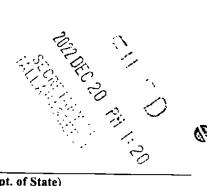
COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: ARGAN'S SPA AN	D FLOWERS DISTRIBUTION INC		
DOCUMENT NUMBER: P18000094641			
The enclosed Articles of Amendment and fee are sub	mitted for filing.		
Please return all correspondence concerning this matt	er to the following:		
AMANDA JARAMILLO			
-	Name of Contact Person		
J.A. ACCOUNTING SERVIC	ES INC		
	Firm/ Company		
8249 NW 36 ST. SUITE 209-A			
	Address		
DORAL, FL 33166			
	City/ State and Zip Code		
AMANDAJARA@HOTMAIL	.СОМ		
E-mail address: (to be use	d for future annual report notification)		
For further information concerning this matter, please	call:		
Name of Contact Person	at () Area Code & Daytime Telephone Number		
Name of Contact Person	Area Code & Daytime Telephone Number		
Enclosed is a check for the following amount made pa	yable to the Florida Department of State:		
■ \$35 Filing Fee & Certificate of Status	S43.75 Filing Fee & S52.50 Filing Fee Certified Copy (Additional copy is enclosed) S52.50 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 The Centre of Tallahassee 2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of



ARGAN'S SPA AND FLOWERS DISTRIBUTION INC	6
(Name of Corporation as curren	tly filed with the Florida Dept. of State)
P18000094641	-
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, thi its Articles of Incorporation:	is Florida Profit Corporation adopts the following amendment(s) t
A. If amending name, enter the new name of the corporation:	
DERMATOLOGY PRODUCTS INC.	
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". "chartered," "professional association," or the abbreviation "P.A	A professional corporation name must contain the world
B. Enter new principal office address, if applicable:	4577 N UNIVERSITY DR
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	LAUDERHILL, FL 33351
C. Enton non-mailing address to the visit	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
 If amending the registered agent and/or registered office adenew registered agent and/or the new registered office address 	dress in Florida, enter the name of the
	<u>15:</u>
Name of New Registered Agent	
	(reet address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
ew Registered Agent's Signature, if changing Registered Agen	t:
hereby accept the appointment as registered agent. I am familiar	with and accept the obligations of the position.
Signature of Nau I	Registered Agent, if changing
oignature of New P	regulered rigerii, ij changing

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	<u>PT</u>	John Do	<u>oc</u>	
X Remove	<u>V</u>	Mike Jo	<u>ones</u>	
_X Add	<u>sv</u>	Sally Sr	<u>mith</u>	
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		-		
Add				
Remove				
f) Change		_		
Add				
Remove				

E. If amendin	ng or adding additional A	Articles, enter change	e(s) here:		
(Attach add	litional sheets, if necessar	y). (Be specific)	of the state of		
					
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<u> </u>					
E If an amand	dment nuovidos fou	-1			
provisions	dment provides for an ex for implementing the ar	mendment if not cont	ion, or cancellation	of issued shares,	
(if not a	applicable, indicate N/A)	The state of the s	amen in the amend	ment usen.	
		-			
			- · · · - · · · · · · · · · · · · · · ·		
					
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 -			-		

The date of each amendment(s) as	DEC. 14/2022 doption:		
date this document was signed.			, if other than the
Effective date if applicable:			
	(no more than 90 c	days after amendment file date)	-
Note: If the date inserted in this bl document's effective date on the De	ock does not most share and the	ole statutory filing requirements, this date will no	ot be listed as the
Adoption of Amendment(s)	(CHECK ONE)		
The amendment(s) was/were adopaction was not required.	pted by the incorporators, or boa	ard of directors without shareholder action and sha	areholder
☐ The amendment(s) was/were adop by the shareholders was/were suf	oted by the shareholders. The mificient for approval.	umber of votes cast for the amendment(s)	
☐ The amendment(s) was/were appr must he separately provided for e	oved by the shareholders throug ach voting group entitled to vote	th voting groups. The following statement e separately on the amendment(s):	
"The number of votes cast fo	or the amendment(s) was/were s	Ufficient for appearal	
		amotent for approval	
	(voting group)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
DEC. 14/202	2		
Signature X	Hula Stell		
	ctor, president or other officer — by an incorporator — if in the har fiduciary by that fiduciary)	if directors or officers have not been ods of a receiver, trustee, or other court	
AI	LEXANDRA STRULL		
	(Typed or printed name	of person signing)	
PR	ESIDENT		
_	(Title of person signing))	