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CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : (367333 751244)

AUTHORIZATION :

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ORDER DATE : July 24, 2020

ORDER TIME : 1:05 PM

ORDER NO. : 367333-005

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#### DOMESTIC AMENDMENT FILING

NAME: BEAUTY BRANDS SUR AMERICA SAS

INC

EFFECTIVE DATE:

XX ARTICLES OF AMENDMENT
RESTATED ARTICLES OF INCORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

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CONTACT PERSON: Amanda Robinson -- EXT#

EXAMINER'S INITIALS:

#### COVER LETTER

| TO: Amendm              | ent Section Division of Corporati            | ons                                   |   |
|-------------------------|--|---------------------------------------|---|
| SUBJECT: Correct        | ct title of officers of the corporation      | on                                    |   |
|                         | Name   | e of Corporation                      |   |
| DOCUMENT NU             | MBER: F18000004756                           |                                       |   |
| The enclosed Ame        | endment and fee are submitted for            | filing.                               |   |
| Please return all co    | orrespondence concerning this ma             | itter to the following:               |   |
| Arturo II. Banegas      | s Masiá                                      |                                       |   |
| ** ** '                 | Name of Contact Person                       |                                       |   |
| Akerman LLP             |  |                                       |   |
|                         | Firm/Company                                 | <del></del>                           |   |
| 520 Madison Ave         | 20th Floor                                   |                                       |   |
|                         | Address                                      |                                       |   |
| New York, NY 10         | 0022   |                                       |   |
|                         | City/State and Zip Code                      |                                       |   |
| arturo.banegasmas       | sia@akerman.com                              |                                       |   |
| E-mail addre            | ess: (to be used for future annual r         | eport notification)                   |   |
| For further information | ation concerning this matter, plea           | se call:                              |   |
| Arturo H. Banegas       | Masiá  | 212 259 6408<br>at ()                 |   |
| Name                    | e of Contact Person                          | at () Area Code & Daytime ^           | Telephone Number  |
| Enclosed is a chec      | k for the following amount:                  |                                       |   |
| I\$35 Filing Fee        | ☐ \$43.75 Filing Fee & Certificate of Status | ☐ \$43.75 Filing Fee & Certified Copy | ☐ \$52.50 Filing Fee<br>Certificate of Status<br>Certified Copy |

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



## PROFIT CORPORATION APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO APPLICATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

(Pursuant to s. 607.1504, F.S.)

### SECTION 1 (1-3 MUST BE COMPLETED)

| F18000  | 004756   |               |   |                   |
|---|--|---------------|---|-------------------|
| <del></del>   | (Document number of corporation (if known)                               | <del></del>   |   |                   |
| BEAUTY BRANDS SUR AMERICA SAS   |  |               |   |                   |
| (Name of cor  | poration as it appears on the records of the Departi                     | nent of Sta   | te)   | <del></del>       |
| COLOMBIA  | 3 10/15/2018   |               |   |                   |
| (Incorporated under law   | 3. 10/15/2018 (Date authori  | zed to do b   | usiness in Florid   | ia)               |
|   | SECTION II   |               |   |                   |
| (4-7 C  | OMPLETE ONLY THE APPLICABLE CHAN   | NGES)         |   |                   |
| . If the amendment changes the name of the incorporation?                           | corporation, when was the change effected under the                      | he laws of i  | its jurisdiction of   | f                 |
| (Name of corporation after the amendment not contained in new name of the corporati | , adding suffix "corporation," "company," or "inco<br>on)                | orporated."   | or appropriate al   | obreviation       |
| (If new name is unavailable in Florida, ente  | r alternate corporate name adopted for the purpose                       | of transact   |   | Flor <u>ida</u> ) |
| i. If the amendment changes the period of   | of duration, indicate new period of duration.                            |               | DZO JUL 27 AM IO: 09<br>SECHETARY OF STATE<br>TALLAHASSEE, FL | 7                 |
|   | (New duration)   | <del></del>   | RY O  | FILE              |
| The amendment changes the jurisdict   | tion of incorporation, indicate new jurisdiction.                        |               | L 27 AM IO: 09<br>IARY OF STATE<br>AHASSEE, FL                | Ö                 |
| -   | (New jurisdiction)   | <del></del>   | -   |                   |
| If amending the registered agent and/or new registered agent and/or the new reg     | registered office address in Florida, enter the nistered office address: | ame of the    |   |                   |
|   |  |               |   |                   |
|   | (Florida street address)   |               |   |                   |
| New Registered Office Address:  | Winds  | Florida_      | (Zip Code)  | _                 |
|   | (City)   |               | (Zip Code)  |                   |
| New Registered Agent's Signature, if ch   | anging Registered Agent:   |               |   |                   |
| Thereby accept the appointment as register  | red agent. I am familiar with and accept the oblig                       | gations of th | ie position.  |                   |
| Signature of New Registe  | and Japan Habanaina  |               |   |                   |
| Signature of New Registe  | тей адень, у снандиц   |               |   |                   |

9. If the amendment changes person, title or capacity in accordance with 607.1504 (4), indicate that change:

| Title/ Capacity  | <u>Name</u>   | <u>Addre</u> :   | <u>ss</u> <u>T</u>                                     | ype of Action  |                     |
|--|---|--|--|--|---------------------|
| p  | Franck P. Delcroix  | CALLE 84 #24-40  | <del> </del>   | DAdd   |                     |
|  |   | BOGOTÁ, REPÚBL   | ICA DE COLOMBIA  | <b>©</b> Remove  |                     |
| S  | Jean Marc Charles   | 233 NE 212 TERRA                                       | CE   |  |                     |
|  |   | MIAMI, FL 33179  | <del></del>  | <b>⊡</b> Remove  |                     |
| D/AR   | Franck P. Deleroix  | CALLE 84 #24-40  |  | ☑ <sub>Add</sub>   |                     |
|  |   | BOGOTÁ, REPÚBL   | ICA DE COLOMBIA  | <b>©</b> Remove  |                     |
| AR Jean Marc Charles   | Jean Marc Charles   | 233 NE 212 TERRA                                       | CE   | 2020 JUL<br>SECIE<br>TALIGA                              | <b>11</b>           |
|  |   | MIAMI, FL 33179  |  | - 27 AM 10: 09  TARYES STATE  AHAPSEE, FLO               |                     |
|  |   | <del> </del>   |  | Remove   |                     |
| <ol> <li>Attached is a<br/>of the applica<br/>under the law</li> </ol> | certificate or document of similar import, etion to the Department of State, by the Secres of which it is incorporated. | evidencing the amendme<br>etary of State or other offi | ent. authenticated not me<br>cial having custody of co | ore than 90 days prior to<br>orporate records in the jur | deliver<br>isdictio |
|  | (Signature of a direct  | ctor, president or other o                             | fficer - if in the hands of                            | <del> </del>   |                     |
|  | Franck Delcroix   | court appointed fiduciary                              | /, by that fiduciary)<br>Director / Designated Re      |  |                     |
|  | (Typed or printed name of person signing)   |  | (Title of person                                       | signing)   |                     |

FILING FEE \$35.00