## Florida Department of State

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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : KIJOENNA SERVICES INC

Account Number : I20080000033 : (305)644-3055 Fax Number : (305)644-3052

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## COR AMND/RESTATE/CORRECT OR O/D RESIGN BEST UNISEX CORPORATION

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## COVER LETTER

| TO: Amendment Ser<br>Division of Cor   |   |  | ,   |
|--|---|--|---|
| NAME OF CORPO  | PRATION: BEST UNISEX CO                     | ORPORATION   | !   |
| DOCUMENT NUM   |   |  | ·   |
| The enclosed Article   | of Amendment and fee are su                 | bmitted for filing.  | <br>  |
| Please return all corr   | espondence concerning this ma               | tter to the following:   | İ   |
|  | ENNA DIEPPA                                 |  | i   |
|  |   | Name of Contact Person   | 1   |
|  | KRISJOENNA SERVICES I                       | NC   |   |
|  | <del></del>                                 | Firn/ Company  | !   |
|  | 2141 SW 1ST STE 110                         |  |   |
|  |   | Address  |   |
|  | MIAMI PL 33135                              |  | ,   |
|  |   | City/ State and Zip Code   | 2   |
|  | KRISJOENNA@YAHOO.CO                         | OM   | :   |
|  | E-mail address: (to be us                   | ed for future annual report  | notification)   |
| For further information  | on concerning this matter, pleas            | se call:   |   |
| ENNA DIEPPA  |   | at (   | 7864997132  |
| Name   | of Contact Person                           | Area Co  | de & Daytime Telephone Number   |
| Enclosed is a check f  | or the following amount made ;              | payable to the Florida Depa  | artment of State:   |
| S35 Filing Fee   | ☐\$43.75 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<br>Divisio<br>The Co<br>2415 N                               | Address ment Section n of Corporations entre of Tallahassee N. Monroe Street, Suite 810 ussee, FL 32303 |

## Articles of Amendment to Articles of Incorporation of

| BEST UNISEX CORPORATION .  |  | ı  |                        |
|--|--|--|------------------------|
| (Name of Corporation as currently  | filed with the Florida D                             | ept. of State)                           |                        |
| K70063   |  | ı  |                        |
| (Document Number of  | Corporation (if known)                               |  |                        |
| Pursuant to the provisions of section 607.1006, Florida Statutes, this F its Articles of Incorporation:  | larida Profit Corporation                            | adopts the following                     | g amendment(s) to      |
| A. If amending name, enter the new name of the corporation:  |  |  |                        |
|  |  |  | The new                |
| name must be distinguishable and contain the word "corporation," "co". Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A "chartered," "professional association," or the abbreviation "P.A."  | ompany," or "incorporate<br>professional corporation | d" or the abbreviation name must contain | n "Corp.,"<br>the word |
| B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)  |  |  |                        |
|  |  |  |                        |
|  |  | !  | <del></del>            |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  |  | i<br>i                                   | <del></del> , .,       |
|  |  |  | <u> </u>               |
|  |  | ,  | <u> </u>               |
| D. If amending the registered agent and/or registered office addre   | ess in Florida, enter the                            | i<br>name of the                         |                        |
| new registered agent and/or the new registered office address;   |  | ;  | -                      |
| Name of New Registered Agent   |  |  |                        |
|  |  |  | -                      |
| (Florida stree   | et address)  |  |                        |
| New Registered Office Address:   | <u> </u>   | . , Florida                              | <del></del>            |
| (1)  | Clty)  | (Zip C                                   | 'ode)                  |
| New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with the second se | ith and accept the obligat                           | ;<br>ions of the position.<br>i          |                        |
| Di , ai B  |  | ·  |                        |
| Signature of New Res   | gistered Agent, if changin                           | g  |                        |
| Check if applicable  |  | 1  |                        |

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/directo | being removed and title, name, | and |
|---|--------------------------------|-----|
| address of each Officer and/or Director being added:  | 1                              |     |

(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                      | $\underline{\mathbf{v}}$ | Mike Jones   |                |             |
| X Add                         | <u>sv</u>                | Sally Smith  |                |             |
| Type of Action<br>(Check One) | Title                    | Name         | Address        |             |
| 1) Change                     | D                        | RUIZ YANETSY | 1301 NW 2 CT   | _           |
| Add                           |                          |              | APT 203        | _           |
| X Remove                      |                          |              | MIAMI FL 33136 | _           |
| 2) Change                     |                          |              |                | _           |
| Add                           |                          |              |                | <del></del> |
| Remove 3) Change              |                          |              |                | <b>_</b>    |
| Add                           |                          |              | 1              |             |
| Remove                        |                          |              |                |             |
| 4) Change                     |                          |              |                | ·           |
| Add                           |                          |              | <del></del>    | _           |
| Remove                        |                          |              | ·              | _           |
| 5) Change                     | •••                      |              |                | _           |
| Add                           |                          |              | <u> </u>       |             |
| Remove                        |                          |              |                | _           |
| 6) Change                     |                          |              |                |             |
| Add                           |                          |              |                | _           |
| Remove                        |                          |              |                |             |

| Attach additional sheets, if nec                                    | onal Articles, enter change(s) here: essary). (Be specific) | 1   |   |
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| <u>If an amendment provides for<br/>provisions for implementing</u> | an exchange, reclassification, or canc                      | ellation of issued shares,<br>e amendment itself: |   |
| (if not applicable, indicate  | N/A)  |   |   |
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|  | 01/12/2024  |   |
|--|---|---|
| The date of each amendment                               |   | , if other than the                         |
| date this document was signed                            |   |   |
| Effective date if applicable:                            | 01/12/2024  |   |
| Effective date is apprenting.                            | (no more than 90 days after amendment file  | date)                                       |
|  | his block does not meet the applicable statutory filing require Department of State's records.  | ements, this date will not be listed as the |
| Adoption of Amendment(s)                                 | (CHECK ONE)   |   |
| The amendment(s) was/wer action was not required.        | e adopted by the incorporators, or board of directors without sl  | hareholder action and shareholder           |
| ☐ The amendment(s) was/wer<br>by the shareholders was/we | e adopted by the shareholders. The number of votes east for the sufficient for approval.  | ne amendment(s)                             |
| ☐ The amendment(s) was/wer must be separately provide    | e approved by the shareholders through voting groups. The fo<br>d for each voting group entitled to vote separately on the amer         | llowing statement<br>adment(s):             |
| "The number of votes                                     | cast for the amendment(s) was/were sufficient for approval  |   |
| by   | .,  |   |
| ,  | (voting group)  |   |
| 01/1   | 2/2024  |   |
| Dated  |   |   |
|  | Que Disasson  | •   |
| Signature  | -oma Diepa  |   |
|  | y a director, president or other difficer - if directors or officers lected, by an incorporator - if in the hands of a receiver, truste |   |
|  | pointed fiduciary by that fiduciary)  | e, or other court                           |
| ι.,.   |   | •   |
|  | ENNA DIEPPA   |   |
|  | (Typed or printed name of person signing)   |   |
|  | DIRECTOR  | Ç   |
|  | (Title of person signing)   |   |