N13000010045

(Re	questor's Name)		
(Ad	dress)		
(Ad	dress)		
(Cit	y/State/Zip/Phone	÷#)	
PICK-UP	WAIT	MAIL	
(Bu	siness Entity Nan	ne)	
(Document Number)			
Certified Copies	_ Certificates	of Status	
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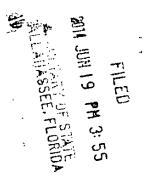




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COVER LETTER

TO: Amendment Section
Division of Corporations

Bivision of Corporations					
NAME OF CORPORATION: CARING	WIGS INC.				
DOCUMENT NUMBER: N13000010	045				
DOCUMENT NUMBER:					
The enclosed Articles of Amendment and fee are sub-	nitted for filing.				
Please return all correspondence concerning this matter	er to the following:				
SANDRA LECORPS					
	(Name of Contact Person	n)			
CARING WIGS INC.		,			
OARTINO WIGO INO.	(Firm/Commun)				
	(Firm/ Company)				
7900 NW 27TH AVE UN	IIT #A-10				
	(Address)				
MIAMI, FL 33147					
	(City/ State and Zip Cod	e)			
E-mail address: (to be used	for future annual report	notification)			
For further information concerning this matter, please	call:				
SANDRA LECORPS	786	554-0605			
(Name of Contact Person)	at (at (ode & Daytime Telephone Number)			
Enclosed is a check for the following amount made payable to the Florida Department of State:					
<u>_</u>	_				
■ \$35 Filing Fee ■\$43.75 Filing Fee & Certificate of Status	Certified Copy	□\$52.50 Filing Fee Certificate of Status			
	(Additional copy is	Certified Copy			
	enclosed)	(Additional Copy is Enclosed)			
30 W	_	·			
Mailing Address Amendment Section	Street Address Amendment Section				
Division of Corporations		on of Corporations			
P.O. Box 6327 Clifton Building					
Tallahassee, FL 32314	2661 E	Executive Center Circle			

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED

CARING WIGS INC.

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

2014 JUN 19 PM 3:55

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

CARING WIGS INC.

(Document Number of Corporation (if known))

Pursuant to the provisions of section 617.1006, Florida Statutes, this Florida Not For Profit Corporation adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name.

B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)

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:			
New Registered Office Address:	(Florida street 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

Page 1 of 4

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 X Remove X Add	<u>PT</u> <u>V</u> <u>SV</u>	John Do Mike Jo Sally Sn	<u>ones</u>	
Type of Action Check One)	<u>Title</u>		Name	<u>Addres</u> s
Change				
Add				
Remove				
2) Change				
Add				
Remove				
3) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		_		
Add				
Remove				

E.	If amending or adding additional Artic	les,	enter change(s) here
	(attach additional sheets, if necessary).	(Be	specific)

Adding Article IX - Voluntary Dissolution of Corporation:

Upon the dissolution of the organization, assets shall be distributed
distributed for one or more exempt purposes within the meaning of
section 501(c)(3) of the Internal Revenue Code,or corresponding
section of any future federal tax code, or shall be distributed to the
federal government, or to a state or local government, for a public
purpose. Any such assets not disposed of shall be disposed of by
a court of competent jurisdiction in the county in which the principal
office of the organization is then located, exclusively for such purposes
or to such organization or organizations, as said Court shall determine,
which are organized and operated exclusively for such purposes.

The date of each amendment(s) adoption: date this document was signed.	, if other than the
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.	
There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.	
Dated June 18 2014	
Signature	
(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
SANDRA LECORPS	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	