

N 160000 10492

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

(Business Entity Name)

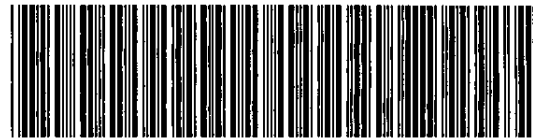
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Darlene  
Spoke with Mr. Toro on 3/22/17  
to correct page 4 of 4 of  
Amendment.

Office Use Only



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02/21/17--01023--007 \*\*35.00

S TALLENT

MAR 22 2017

*Amended*

FILED  
17 MAR 21 PM 1:45  
CLERK OF STATE  
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

February 28, 2017

RUBEN D. TORO  
RUBEN TORO P.A.  
7901 KINGSPONTE PKWY STE. 31  
ORLANDO, FL 32819

SUBJECT: BEAUTY SOUL WELLNESS AND COSMETIC SERVICES CORP.  
Ref. Number: N16000010492

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The document you submitted has been prepared pursuant to profit statutes (chapter 607, Florida Statutes). As the entity was originally filed as a nonprofit corporation, this document should be filed pursuant to chapter 617, Florida Statutes.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Susan Tallent  
Regulatory Specialist II

Letter Number: 217A00003847

RECEIVED  
17 MAR 21 AM 11:57  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**NAME OF CORPORATION:** BEAUTY SOUL WELLNESS AND COSMETIC SERVICES CORP.

**DOCUMENT NUMBER:** N16000010492

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

RUBEN D. TORO

(Name of Contact Person)

RUBEN TORO P.A.

(Firm/ Company)

7901 KINGSPONTE PKWY STE. 31

(Address)

ORLANDO FL 32819

(City/ State and Zip Code)

rubentorocpa@htomail.com

✓

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Ruben D. Toro

407-370-6445

at

(Name of Contact Person)

(Area Code) (Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

- |   |  |   |  |
|---|--|---|--|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is<br>enclosed) | <input type="checkbox"/> \$52.50 Filing Fee<br>Certificate of Status<br>Certified Copy<br>(Additional Copy is<br>Enclosed) |
|---|--|---|--|

**Mailing Address**

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address**

Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

Articles of Amendment  
to  
Articles of Incorporation  
of

BEAUTY SOUL WELLNESS AND COSMETIC SERVICES CORP.

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

N16000010492

(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)*

**C. Enter new mailing address, if applicable:**

*(Mailing address MAY BE A POST OFFICE BOX)*

**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: \_\_\_\_\_

(Florida street address)

New Registered Office 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*

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TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

**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 Doe

X Remove                    V        Mike Jones

X Add                         SV      Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add	_____	_____	_____
<input type="checkbox"/> Remove	_____	_____	_____
2) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add	_____	_____	_____
<input type="checkbox"/> Remove	_____	_____	_____
3 ) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add	_____	_____	_____
<input type="checkbox"/> Remove	_____	_____	_____
4) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add	_____	_____	_____
<input type="checkbox"/> Remove	_____	_____	_____
5) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add	_____	_____	_____
<input type="checkbox"/> Remove	_____	_____	_____
6) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add	_____	_____	_____
<input type="checkbox"/> Remove	_____	_____	_____

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

ARTICLE III. (Amended) The Corporation is organized exclusively to provide medical, dental, mental, nutritional health, and christian counseling services to all persons regardless of race, color or creed free of charge consistent with the requirements for a tax exemption under Internal Revenue Code Section 501 (c) (3) and related regulations or the corresponding section (s) of any future federal tax code.

ARTICLE VIII. (Additional) POWERS: Unless otherwise provided in these Articles, the Corporation shall have all of the powers implied provided in the law. Moreover, the corporation shall have all the powers necessary and proper to carry out its express power. The corporation shall have no powers to take any action prohibited by the law.

(See additional sheets for additional chapters)

**BEAUTY SOUL WELLNESS AND COSMETIC SERVICES CORP**

**ADDITIONAL ARTICLES OF INCORPORATION**

ARTICLE IX.(Additional). LIMITS OF POWERS The Corporation shall have no power to take any action that would be inconsistent with the requirements for a tax exemption under Internal Revenue Code Section 501 c) G), and related regulations, rulings and procedures. The Corporation shall have no power take any action that would be inconsistent with the requirements for receiving tax deductible charitable contributions under Internal Revenue Code Section 17o (C) (2) and related regulations, ruling, and procedures. Regardless of any other provision in these Articles of Incorporation or State law, the Corporation shall have no power to

1. Engage in activities or use its assets in manner that are not in furtherance of one or more exempt, purposes as set forth and defined by the Internal Revenue Code an related regulations, rulings, and procedures, except to an insubstantial degree
2. Serve a private interest other than one that is clearly incidental to an overriding public interest;
3. Devote more than an insubstantial part of its activities to attempting to influence legislation by propaganda or otherwise, except as provided by the Internal Revenue Code and related regulations, rulings and procedures;
4. Participate in or intervene in any political campaign on behalf of or in opposition to any candidate for public office. The prohibited activities include the publishing or distributing of statements and any other direct or indirect campaign activities,
5. Have objectives that characterize it as an action or organization as defined by the Internal Revenue Code and related regulations, rulings and procedures;
6. Distribute its assets on dissolution other for one or more exempt purposes. On dissolution, the Corporation ' s assets shall be distributed to the State Government for a public purpose, or to an organization exempt from t under Internal Revenue Code Section 501 (c) (3) to be used to accomplish the general purpose for which the Corporation was organized;
7. Permit any part of the net earnings of the Corporation to insure the benefit of any member of the Corporation or any private individual
8. Carry on an unrelated trade or business except as a secondary purpose related to the Corporation ' s primary, exempt purposes.

ARTICLE X (Additional). NO PROFITS OR DIVIDENDS No part or the net earnings of BEAUTY SOUL WELLNESS AND COSMETIC SERVICES CORP. shall inure to the benefit of, or be distributable to its officers, to other private persons, except that the organization shall be authorized and empowered pay reasonable compensation for services rendered.

The date of each amendment(s) adoption: 02/06/2017, if other than the date this document was signed.

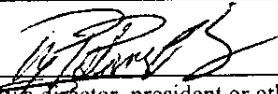
Effective date if applicable: \_\_\_\_\_  
(no more than 90 days after amendment file date)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

**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.

02/06/2017  
Dated \_\_\_\_\_

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 court appointed fiduciary by that fiduciary)

Anthony Bui

\_\_\_\_\_  
(Typed or printed name of person signing)

President

\_\_\_\_\_  
(Title of person signing)