(Re	equestor's Name)	
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: K BEAUTY & FASHION INC DOCUMENT NUMBER: P00000000707					
The enclosed Articles	of Amendment and fee are su	bmitted for filing.			
Please return all corres	pondence concerning this ma	tter to the following:			
	MIN BAE	-			
	MIN BAE CPA	Name of Contact Person	1		
		Firm/ Company			
	10151 DEERWOO	OD PARK BLVD	BLDG 200 STE 250		
		Address			
	JACKSONVIL	LE, FL 32256	<u> </u>		
		City/ State and Zip Cod	e		
MII	NBAE@COMO	CAST.NET			
	_	sed for future annual report	notification)		
For further information	concerning this matter, pleas	se call:			
MIN BAE		_{at} 904	864-2588		
Name o	f Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check for	Enclosed is a check for the following amount made payable to the Florida Department of State:				
\$35 Filing Fcc	□\$43.75 Filing Fee & Certificate of Status	☐S43.75 Filing Foe & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Ame Divis P.O.	ing Address indirect Section ion of Corporations Box 6327 hassec, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle ssec, FL 32301		

Articles of Amendment Articles of Incorporation of

14 40	Mary .
14 May /	9 11 3:40

K BEAL	JTY & F	ASHION	INC		
(I	Name of Corp	oration as current	tly filed with the	Florida Dept. o	(State)

P00000000707

dment(s) to

(Document Number	of Corporation (if known)		
Pursuant to the provisions of section 607.1006, Flo its Articles of Incorporation:	rida Stanutes, this <i>Florida Pr</i>	ofit Corporation adopts the following a	amendmo
A. If amending name, enter the new name of the	corporation:		
			The nev
name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation "Coword "chartered." "professional association," or the containing the containing and the containing the contai	orp," "Inc," or "Co". A p.		
B. Enter new principal office address, if applica	<u></u>		
(Principal office address MUST RE A STREET A	(DDRESS)		
	 -		
C. Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE)	<u>BOX</u>)		
The second state of the se			
D. If amending the registered agent and/or registered agent and/or the new registered agent and/or the new registered.		rida, enter the name of the	
Name of New Registered Agent	_ 	 _	
	(D)		
	(Florida street address)		
New Registered Office Address:	(City)	, Florida(Zip Code)	
	(Cuy)	(Zip Chue)	
New Registered Agent's Signature, if changing F	Registered Agent:		
I hereby accept the appointment as registered ugen	t. I am familiar with and oc	cept the obligations of the position.	
<u></u>			

Signature of New Registered Agent, if changing

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.

Z.Change	PT	Into Doc	
X Romove	¥	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change	sv	KYUNG RAN KIM	1324 E UNIVERSITY AVE
√ ∧dd			GAINESVILLE
Remove			FL 32641
2) Change	****		
☐ ∧dd			
Remove			_
3) Change			
Add			
Remove			
[]			
4) Change			
∧ad			
Remove			
5) Change			
Add			
Remove			
f) Change			
Add			
Remove			

If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)		mending or adding additional Articl ach additional sheets, if necessary).	(Be specific)
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(if not applicable, indicate N/A)	pro	ovisions for implementing the amen-	ndment if not contained in the amendment itself:
		(if not applicable, indicate N/A)	
		184 18	

	ch amendment(s) adoption:	, if other than the
Effective date	•	
	(no more than 90 days after amendment file date)	
Adoption of A	mendment(s) (CHECK ONE)	
The amenda	ment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) cholders was/were sufficient for approval.	I
The amenda	ment(s) was/were approved by the shareholders through voting groups. The following statement parately provided for each voting group entitled to vote separately on the amendment(s):	nt
"The n	number of votes cast for the amendment(s) was/were sufficient for approval	
ъу		
	(voting group)	
The amendar action was n	ment(s) was/were adopted by the board of directors without shareholder action and shareholder to required.	•
The amendm action was no	nent(s) was/were adopted by the incorporators without shareholder action and shareholder not required.	
	Dated 05/13/2014	
$\rightarrow X$	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)	•
	SUNG HO KIM	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	