

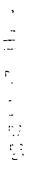
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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPO	RATION: INTERNATIONA	L AESTHETIC CORPORA	ATION
	BER: P00000005197		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	espondence concerning this ma	tter to the following:	
	NATALIA SOTELO		
		Name of Contact Person	1
	INTERNATIONAL AESTH	ETIC CORPORATION	
		Firm Company	
	2000 NW 133rd AVENUE S	UITE 4 & 6	
		Address	
	MIAMI, FLORIDA 33182		
		City/ State and Zip Cod	e
	NATALIA.SOTELO@GDC	BEAUTYGROUP.US	
	•	sed for future annual report	notification)
For further information	on concerning this matter, plea		463-6774
Name	Name of Contact Person		de & Daytime Telephone Number
Enclosed is a check for	or the following amount made		
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			Address
Amendment Section Division of Corporations		Amendment Section Division of Corporations	
P.O. Rox 6327		The Centre of Tallahassee	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment Articles of Incorporation of

 \square The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

INTERNATIONAL AESTHETIC CORPORATION	
(Name of Corporation as currently	filed with the Florida Dept. of State)
P00000005197	
(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, this <i>I</i> its Articles of Incorporation:	Horida Profit Corporation adopts the following amendment(s) t
A. If amending name, enter the new name of the corporation:	

name must be distinguishable and contain the word "corporation," "c "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A "chartered," "professional association," or the abbreviation "P.A."	ThenewThenew
B. Enter new principal office address, if applicable:	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	
	··
C. Enter new mailing address, if applicable:	
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	
	•
D. If amending the registered agent and/or registered office addr new registered agent and/or the new registered office address:	
Name of New Registered Agent	
tFlorida stre	et address) ,
New Registered Office Address:	, Florida
•	(City) (Zîp Code)
New Registered Agent's Signature, if changing Registered Agent:	
Thereby accept the appointment as registered agent. I am familiar w	
Signature of Nove R.	rgistered Agent, if changing
	William on Marine A considered
Chack if applicable	

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.

X Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	PD	HUGO A. SOTELO	7240 NW 113th COURT
Add			DORAL, FLROIDA 33178
X Remove 2) Change	PD	NATALIA SOTELO	8750 NW 99th PATH
X Add			DORAL, FLROIDA 33178
Remove 3) Change			
Add			
Remove 4) Change			
Add			
Remove			
51 Change			
Add Remove			
6) Change			
Add			
Remove			

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f 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)	
(ij noi applicane, maicale (vzi)	
···	

The date of each amendment(s) addet this document was signed.	loption:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this b document's effective date on the De	lock does not meet the applicable statutory filing requirements, this date partment of State's records.	will not be listed as th
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were add action was not required.	opted by the incorporators, or board of directors without shareholder action	and shareholder
☐ The amendment(s) was/were add by the shareholders was/were st	opted by the shareholders. The number of votes cast for the amendment(s) flicient for approval.	
	proved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	t
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
DatedO1/	29/2024	
Signature	HIDIO,	
	rector, president prother officer – if directors or officers have not been I, by an incorporator – if in the hands of a receiver, trustee, or other court	
	ed fiduciary by that fiduciary)	
	NIATALIA COTTELO	
	MATACIA SOTELO (Typed or printed name of person signing)	
	PRESIDENT (Title of person signing)	
	((title of person signing)	