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S. YOUNG

COVER LETTER

TO: Amendment Section Division of Corporations					
NAME OF CORPORATION: 6 Rand	Salon Reception Hall, INC.				
DOCUMENT NUMBER: P00000	048022				
The enclosed Articles of Amendment and fee are sub					
Please return all correspondence concerning this mat					
Miriam	Poretal.				
	Name of Contact Person				
20.7	Firm/ Company				
<u> </u>	U 104 STREET				
9950 SW 104 Street Address Hiami, Fl. 33176.					
	City/ State and Zip Code				
E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, pleas	se call:				
Minam Portul.	at (305) 596 2099.				
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:					
■ \$35 Filing Fee Secretificate of Status	S43.75 Filing Fee & S52.50 Filing Fee Certified Copy (Additional copy is enclosed) S52.50 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	Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, Fl. 32303				

Articles of Amendment

to

Articles of Incorporation of

Corand Salon Reception	n Hall, INC.
(Name of Corporation as curren	tly filed with the Florida Dept. of State)
P000000 48022	
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
Grand Salon Reception Halls & B name must be distinguishable and contain the word "corporation."	all Rooms, INC. The new
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". "chartered," "professional association," or the abbreviation "P.A.	A professional corporation name must contain the word
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
	207
	- E T
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	See in
	7 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
D. If amending the registered agent and/or registered office ad- new registered agent and/or the new registered office address	
Name of New Registered Agent	
(Florida s	treet 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 familian	nt: with and accept the obligations of the position.
Signature of New	Registered Agent, if changing

Check if applicable

☐ 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/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Example:

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> <u>J</u>	ohn Doe	
X Remove	<u>Y</u> <u>N</u>	Mike Jones	
X Add	<u>sv</u> <u>s</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

ttach additional sheets, if necessary).	(Be specific)		
-			_
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- 			
an amendment provides for an excha	nge, reclassification, or car	rcellation of issued shares,	
rovisions for implementing the amen-	dment if not contained in t	he amendment itself:	
(if not applicable, indicate N/A)			
		<u> </u>	
	-		

The date of each amendment(s) adoption:date this document was signed.	, if other than the
Effective date if analisable.	
Effective date <u>if applicable</u> : (no more than 90 days after	amendment file date)
Note: If the date inserted in this block does not meet the applicable statute document's effective date on the Department of State's records.	ory filing requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board of dir action was not required.	ectors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders. The number of by the shareholders was/were sufficient for approval.	f votes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting must be separately provided for each voting group entitled to vote separately.	groups. The following statement stely on the amendment(s):
"The number of votes cast for the amendment(s) was/were sufficient	t for approval
(voting group)	
Dated 02/21/2020 Signature (By a director president or other officer – if dire	ctors or officers have not been
selected, by an incorporator – if in the hands of a appointed fiduciary by that fiduciary)	receiver, trustee, or other court
Orlay of E (Typed or printed name of per	Rodniquez.
President	·
(Title of person signing)	