P01000024648

(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	+ f)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

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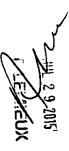


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SECRETARY OF STATE TALLAHASSEE, FLORIDA





COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: NU-AGE H	AIR & NAIL SAL	ON, INC.		
DOCUMENT NUMBER: P01000024648				
The enclosed Articles of Amendment and fee are sul	bmitted for filing.			
Please return all correspondence concerning this mat	ter to the following:			
DUNG TRAN		:		
	Name of Contact Persor	1		
		· •		
	Firm/ Company			
6813 SR 54				
	Address			
NEW PORT RICH	HEY, FL 34653			
	City/ State and Zip Code	<u>. </u>		
DUNGTRAN202@YAHOO.COM				
E-mail address: (to be us	ed for future annual report	notification)		
For further information concerning this matter, please call:				
MARIA HADFIELD	at (727	376-5080		
Name of Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check for the following amount made payable to the Florida Department of State:				
\$35 Filing Fee \$\times \text{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 Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building xecutive Center Circle ussee, FL 32301		

Articles of Amendment to **Articles of Incorporation**

NU-AGE HAIR & NAIL S			· · · · · · · · · · · · · · · · · · ·	_
P01000024648	s currently filed with the Flor	<u>ida Dept. of Si</u>	<u>late</u>)	
(Docume	nt Number of Corporation (if k	nown)		-
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, this Flo	orida Profit Co.	rporation adopts the following	ng åmendment(s) to
A. If amending name, enter the new na	ame of the corporation:			•
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associates. B. Enter new principal office address,	nation "Corp," "Inc," or "Co ation," or the abbreviation "P.	". A professio	or "incorporated" or the a nal corporation name must	_The new abbreviation contain the
(Principal office address <u>MUST BE A S</u>				-
C. Enter new mailing address, if appl (Mailing address MAY BE A POST) D. If amending the registered agent an	OFFICE BOX)	in Florida on		14 JUL I SECRETA TALLAHAS
new registered agent and/or the new		<u>in Fiorida, en</u>	ter the name of the	II PM TARY OF ASSEE,
Name of New Registered Agent	DUNG TRAN)FS:
	6813 SR 54			37 RAIE RAIE
New Registered Office Address:	(Florida street NEW PORT RICH	•	, Florida_34653	. »
	(City)		(Zip Code)	
New Registered Agent's Signature, if c	ered agent. I am familiar with	and accept the	obligations of the position.	

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 <math>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:	•	nin, or all an maa.	
X Change	<u>PT</u> <u>Jol</u>	hn Doe	
X Remove	<u>V</u> <u>Mi</u>	ike Jones	
_X Add	<u>SV</u> <u>Sa</u>	Ily Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	PSTD	XUAN NGUYEN DU	6813 SR 54
Add			NEW PORT RICHEY, FL
Remove			34653
2) Change	PSTD	DUNG TRAN	6813 SR 54
Add			NEW PORT RICHEY, FL
Remove			34653
3) Change			
Add			
Remove			Ň
[]			
4) L Change			
Add			
Remove			
5) Change			
Add Add	••••		
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Artic (Attach additional sheets, if necessary).	
/A	
If an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
(if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
/A	
	,
	,
	,

The date of each amendmen date this document was signed	t(s) adoption: JULY 2, 2014 I.	, if other than the
Effective date if applicable:	JULY 2, 2014	
	(no more than 90 days after amendment file date)	_
Adoption of Amendment(s)	(CHECK ONE)	
	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.	
The amendment(s) was/we must be separately provide	re approved by the shareholders through voting groups. The following statement ed for each voting group entitled to vote separately on the amendment(s):	
"The number of votes	s cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voling group)	
The amendment(s) was/we action was not required.	re adopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/wer action was not required.	re adopted by the incorporators without shareholder action and shareholder	
Dated	to 7/9/14	
\ Signature	Luanh	_
Se	by a director, president or other officer – if directors or officers have not been elected, by an incorporator – if in the hands of a receiver, trustee, or other court oppointed fiduciary by that fiduciary)	
	XUAN NGUYEN DU	
	(Typed or printed name of person signing)	

PRESIDENT, SECRETARY, TREASURER, DIRECTOR
(Title of person signing)