## PO1000073218

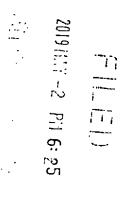
(Re	equestor's Name)		
(Ad	ddress)		
(Ac	ddress)		
(C	ity/State/Zip/Phone	e #)	
PICK-UP	MAIT WAIT	MAIL	
(Business Entity Name)			
(Document Number)			
Certified Copies	Certificates	s of Status	
Special Instructions to Filing Officer:			

Office Use Only



200328396212

05/02/13--01018--013 \*\*85.00



Amund

MAY 13 2019

I ALBRITTON

## **COVER LETTER**

TO: Amendment Section

Division of Corporations NAME OF CORPORATION: \_\_\_Salon Inga IVIC DOCUMENT NUMBER: \_\_\_ The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: 11722 N. DOILE MADRY HWY IMAED SAIONINGCI - CCM

E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (<u>E13</u>) <u>963 · 1313</u> Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: S35 Filing Fee ■\$43.75 Filing Fee & □\$43.75 Filing Fee & ■\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy (Additional Copy enclosed) is enclosed) Street Address **Mailing Address** Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

## Articles of Amendment to Articles of Incorporation of

Salon	1.000	110/
~/////Y1	. VV V VI X	1V 11 .
$ \sim$ 11 $\circ$ 1	11 00	1110

(Document Number of	f Corporation (if known)
rsuant to the provisions of section 607,1006, Florida Statutes, this . Articles of Incorporation:	Florida Profit Corporation adopts the following amendm
If amending name, enter the new name of the corporation:	
	The nev
me must be distinguishable and contain the word "corporation" "orp.," "Inc.," or Co.," or the designation "Corp," "Inc," or " rd "chartered," "professional association," or the abbreviation "	'Co". A professional corporation name must contain the
Enter new principal office address, if applicable: rincipal office address <u>MUST BE A STREET ADDRESS</u> )	
	201
	2019 115
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
	¬ i
	٠ <u>٠</u> ٠. ٠
	- Po
If amending the registered agent and/or registered office addr new registered agent and/or the new registered office address	ress in Florida, enter the name of the
Name of New Registered Agent	
(Florida str	reet address)
New Registered Office Address:	(City) , Florida (Zip Code)

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 Dov 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	<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		Tanja Catce	11722 N MILE MADRY HW
X Add			Tampal, FL 33618
Remove			
2) Change			
Add			
Remove			
3) Change	_		
Add			
Remove			
4) Change			
Add			
Remove			-1
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

The date of each amendment(s) adoption: Jate this document was signed.		, if other than the
Ç		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file	date)
Note: If the date inserted in this block does document's effective date on the Department	s not meet the applicable statutory filing require of State's records.	ments, this date will not be listed as the
Adoption of Amendment(s) (9	CHECK ONE)	
The amendment(s) was/were adopted by t by the shareholders was/were sufficient fo	he shareholders. The number of votes east for the or approval.	e amendment(s)
	the shareholders through voting groups. The foli- ing group entitled to vote separately on the amen	
"The number of votes cast for the ar	mendment(s) was/were sufficient for approval	
by	(voting group)	
(	(voting group)	
☐ The amendment(s) was/were adopted by t action was not required.	he board of directors without shareholder action a	md shareholder
☐ The amendment(s) was/were adopted by t action was not required.	he incorporators without shareholder action and s	harcholder
Dated 4 28 1	7	
Signature June 1		
Signature OWO	resident or other officer – it directors or officers b	nave not been
	neorporator – if in the hands of a receiver, trustee	
appointed fiduci	ary by that fiduciary)	
	(Typed or printed name of person signing)	
	(Title of person signing)	
	Cran or benow against	