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05/23/17--01023--007 **50.00

SECRETARY OF STATES OF STATES OF CORPORATION

MAY **30** 2017 C MCNAIR

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORAT	ION: SHEBA I	BEAUTY	<u>)</u>	pidly fuc		
DOCUMENT NUMBER	: Po 000C	182 74	18	- poly fuc		
The enclosed Articles of A	Amendment and fee are sul	omitted for filing.				
Please return all correspon	Please return all correspondence concerning this matter to the following:					
_	MAHM	Name of Conta	BIEIN act Person			
	Firm/ Company					
2650 NW 38th St Address BOCA RATON FL 332/34						
		Addre	ss and	rli		
	SOCA ILATU	City/ State and	コリケラ Zip Code	<u> </u>		
		•	•			
	E-mail address: (to be us	ed for future annu	ual report no	tification)		
For further information concerning this matter, please call:						
MAHMON	D BARNEIR	at (Stel	& Daytime Telephone Number		
Name of C	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	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Certified Cop (Additional control of enclosed)	ру	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Amend Divisio P.O. Bo	e Address ment Section n of Corporations ox 6327 ssee, FL 32314		Division Clifton B 2661 Exe	ent Section of Corporations		

Articles of Amendment to Articles of Incorporation of



5HEBA BEAUTY Supply Five(Name of Corporation as currently filed with the Florida Dept. of State)
Polocoo82748

P01000082748		ھن``
(Document Number of C	Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>F</i> its Articles of Incorporation:	lorida Profit Corporation adopts the following amendmen	nt(s) to
A. If amending name, enter the new name of the corporation:		
SHEBA MARKETING DISTRIBUTION In name must be distinguishable and contain the word "corporation, "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc.," or "Coword "chartered," "professional association," or the abbreviation association assoc	" "company," or "incorporated" or the abbreviation o". A professional corporation name must contain the .A."	
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	BOCA RATION FZ 33433	#74
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	· · · · · · · · · · · · · · · · · · ·	
D. If amending the registered agent and/or registered office address: new registered agent and/or the new registered office address:	ss in Florida, enter the name of the	
Name of New Registered Agent		
/(Florida stree	,	
New Registered Office Address:	, Florida	
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar wi	th and accept the obligations of the position.	

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.

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)	Title	<u>Name</u>	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change		_	
Adđ			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove		/	

f amending or adding additional Attach additional sheets, if necessar	y). (Be specific)
f an amendment provides for an e	exchange, reclassification, or cancellation of issued shares,
provisions for implementing the a (if not applicable, indicate N/A	amendment if not contained in the amendment itself:
	/
	I

The date of each amendment(s) adoption date this document was signed.	MAY	10th	2617	, if other than the
Effective date <u>if applicable</u> :	(no more the	an 90 days afte	er amendment file do	ate)
Note: If the date inserted in this block do document's effective date on the Departmen			tory filing requirem	ents, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)			
The amendment(s) was/were adopted by by the shareholders was/were sufficient		The number o	f votes east for the a	mendment(s)
☐ The amendment(s) was/were approved be must be separately provided for each vo				
"The number of votes cast for the a	mendment(s) was	/were sufficien	t for approval	
by			,,,	
	(voting group)			
☐ The amendment(s) was/were adopted by action was not required.	the board of direc	tors without sh	nareholder action and	d shareholder
☐ The amendment(s) was/were adopted by action was not required.	the incorporators	without shareh	older action and sha	reholder
Dated5/10	2017			
Signature Make	٠- ک			
(By a director,			ectors or officers have	
	incorporator – if i iary by that fiduci		a receiver, trustee, o	or other court
.,				
<u> </u>	(Typed or prin	BABI	61R	
	(Typed or prin	ted name of pe	erson signing)	
	Pr	ro den	<u> </u>	
	(T	itle of person s	signing)	