

P01000109842

Requester's Name

2217 NE 2ND ST. #6

Pompano Beach, FL 33069

City/State/Zip

Phone #

100005000581--7
-02/25/02-01045-011
*****43.75 *****43.75

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. _____
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

- ☐ Walk in ☐ Pick up time _____ ☐ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS

- ☐ Profit
☐ Not for Profit
☐ Limited Liability
☐ Domestication
☐ Other

OTHER FILINGS

- ☐ Annual Report
☐ Fictitious Name

AMENDMENTS

- ☒ Amendment
☐ Resignation of R.A., Officer/Director
☐ Change of Registered Agent
☐ Dissolution/Withdrawal
☐ Merger

REGISTRATION/QUALIFICATION

- ☐ Foreign
☐ Limited Partnership
☐ Reinstatement
☐ Trademark
☐ Other

FILED
02 MAR -7 AM 10:56
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

Examiner's Initials

AL 3/11



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

954 2494867

February 27, 2002

NILSON MOREIRA
2217 NE 2ND ST., #6
POMPANO BEACH, FL 33064

SUBJECT: UNITED LAWN CARE, INC.
Ref. Number: P01000109842

We have received your document for UNITED LAWN CARE, INC. and check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The document must contain written acceptance by the registered agent, (i.e. "I hereby am familiar with and accept the duties and responsibilities as registered agent for said corporation/limited liability company"); and the registered agent's signature.

Please check 1 box in block 4.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6908.

Anna Chesnut
Corporate Specialist

Letter Number: 702A00012119

RECEIVED
02 MAR - 7 AM 9:07
DIVISION OF CORPORATIONS

**ARTICLES OF AMENDMENT
TO
ARTICLES OF INCORPORATION
OF**

UNITED LAWN CARE, INC.

(present name)

Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida profit corporation adopts the following articles of amendment to its articles of incorporation:

FIRST: Amendment(s) adopted: (indicate article number(s) being amended, added or deleted)

ARTICLE 7: Amended - The officers of the Corporation shall be:

President: NILSON MOREIRA - 2217 NE 2ND ST. #6 - POMPANO BEACH - FL 33062

Vice-President: SANDRA MARIA DA SILVA - 2217 NE 2ND ST. #6 - POMPANO BEACH - FL 33069

Treas: NILSON MOREIRA - 2217 NE 2ND ST. #6 - POMPANO BEACH - FL 33062

Secretary: NILSON MOREIRA - 2217 NE 2ND ST. #6 - POMPANO BEACH - FL 33062

REG AGENT:

DESPACHANTE BRASILEIRO

3961 N. FEDERAL HWY

POMPANO BEACH - FL 33064

ARTICLE 6: AMENDED - DIRECTORS

AMENDED NAME: NEW NAME OF THE CORP:

The Director(s) of the Corporation shall be NILSON MOREIRA &
SANDRA MARIA DA SILVA

ALLSKIN NATURAL BEAUTY, INC.

SECOND: If an amendment provides for an exchange, reclassification or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself, are as follows:

THIRD: The date of each amendment's adoption: FEBRUARY 19, 2002

FOURTH: Adoption of Amendment(s) (CHECK ONE)

☐ The amendment(s) was/were approved by the shareholders. The number of votes cast for the amendment(s) was/were sufficient for approval.

☐ The amendment(s) was/were approved by the shareholders through voting groups.

FILED
02 MAR - 7 AM 10:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):

"The number of votes cast for the amendment(s) was/were sufficient for approval by _____ voting group."

- ☒ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
- ☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Signed this 19TH day of FEBRUARY, 19 2002.

Signature Nilson Moreira
(By the Chairman or Vice Chairman of the Board of Directors, President or other officer if adopted by the shareholders)

OR

(By a director if adopted by the directors)

OR

(By an incorporator if adopted by the incorporators)

NILSON MOREIRA

Typed or printed name

PRESIDENT

/ Director

Title

I hereby am familiar with and accept the duties and responsibilities as registered agent for said corporation.

Despachante Brasileiro

March/04 /02