PO1000117193

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ASP 5/19/09

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF COR	PORATION:	Bay Hair Care, Inc.		
DOCUMENT NUMBER:		P01000117193		
The enclosed Art	icles of Amendment and fee	are submitted for filing.		
Please return all c	correspondence concerning th	is matter to the following:		
		Grant H. Givens		
	!	Name of Contact Person		
	Bay Hair Care, Inc.			
		Firm/ Company		
	P. O. Box 789			
	Address			
		nn Haven, FL 32444		
	C	City/ State and Zip Code		
	E-mail address: (to be use	@knology.net after future annual report notification)		
For further inform	nation concerning this matter,	please call:		
	Grant H. Givens		65-0335	
Name	e of Contact Person	Area Code & Daytime Te	lephone Number	
Enclosed is a chec	k for the following amount n	nade payable to the Florida Depar	rtment of State:	
7] \$35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Address		Street Address		

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to

	articles of Incorporatio	• // / •
	· of	2009 MAY 13 AM 9: 08 A Dept. of State TALLAHAS Y US.
Bay Ha	air Care, Inc.	
(Name of Corporation as curre	ntly filed with the Florid	la Dept. of State) TALL RETAIN 417 9: 08
P010	000117193	LLAHASSEF STATE
(Document Num	ber of Corporation (if kno	2009 MAY 13 AM 9: 08 In Dept. of State) TALLAHASSEE. FLORIDA Own)
rsuant to the provisions of section 607.1006 tendment(s) to its Articles of Incorporation:	, Florida Statutes, this Fi	lorida Profit Corporation adopts the follow
If amending name, enter the new name of	the corporation:	
		The new
me must be distinguishable and contain the hreviation "Corp.," "Inc.," or Co.," or the t me must contain the word "chartered," "prof	designation "Corp," "Inc	c," or "Co". A professional corporation
Enter new principal office address, if appli	icable:	
rincipal office address <u>MUST BE A STREE</u> T		
		
		,
Enter new mailing address, if applicable:		
(Mailing address <u>MAY BE A POST OFFIC</u>	E BOX)	
If any and the matter was to the second and the sec		EN 11 A About Calo
If amending the registered agent and/or renew registered agent and/or the new regist		n Florida, enter the name of the
	O VO VIIIV WWW VOOL	
Name of New Registered Agent:		
New Registered Office Address:	(Florida street a	ddress)
<u> </u>		
-	(City)	, Florida (Zip Code)
	(City)	(Zip Code)
w Registered Agent's Signature, if changing	Registered Agent:	
reby accept the appointment as registered ag	ent. I am familiar with a	nd accept the obligations of the position.
Sie	gnature 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)

Title	Name	Address	Type of Action
VP	Daniel O. Flaat	3208 Deer Haven Blvd	Add
		Panama City Beach, FL 32408	Remove
· The state of the			□ Add
			☐ Remove
			☐ Add
			Remove
E. <u>If amendin</u>	g or adding additional Articles, ente	r change(s) here:	
(attach addi	tional sheets, if necessary). (Be spec	rific)	
-			
4.——— <u>—————————————————————————————————</u>			
· · · · · · · · · · · · · · · · · · ·		·· ···································	
17 I F			
<u>provisions</u>	idment provides for an exchange, re for implementing the amendment if	classification, or cancellation of issu- not contained in the amendment it	<u>ied shares,</u> self:
(if not a	applicable, indicate N/A)		
·			
			
·			

The date of each amendmen	t(s) adoption: <u>5/11/09</u>
Effective date <u>if applicable</u> :	5/11/09
•	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
	ere adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.
	ere 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	cast for the amendment(s) was/were sufficient for approval
by	>>
	(voting group)
The amendment(s) was/we action was not required.	ere adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/we action was not required.	ere adopted by the incorporators without shareholder action and shareholder
Dated_5/12	2/09
Signature_	Jane Jeur
sel	y a director, president or other officer – if directors or officers have not been ected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)
	Grant H. Givens
	(Typed or printed name of person signing)
	President
	(Title of person signing)