# PD20000020308

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Amend

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## **COVER LETTER**

Division of Corporat	ions				
NAME OF CORPORAT	rion: Salon	Creations	Inc.		
DOCUMENT NUMBER: PO 2 0000 2030 8					
The enclosed Articles of A	Amendment and fee are sub	omitted for filing.			
Please return all correspon	ndence concerning this mat	ter to the following:			
_(	Chankija	Name of Contact Person	Kdy		
	1425 NE	Firm/ Company  Address	ce		
Cape Coral, Fz 33909 City/ State and Zip Code					
Shana von chakdul (1) Ve. Com E-mail address (to be used for future annual report notification)					
For further information concerning this matter, please call:					
Chankila Name of C	Von phakay	at ( <del>239</del> Area Coo	3/3-3240 le & 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 Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Mailine	r Addmon	Street	A ddwoon		

### Mailing Address

TO: Amendment Section

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

### Street Address

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

# Articles of Amendment

to

# **Articles of Incorporation**

O of	The state of the s
Salon Creations Inc.	
(Name of Corporation as currently filed w	ith the Florida Dept. of State)
P02000020308	The state of the s
(Document Number of Corpora	ation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida</i> its Articles of Incorporation:	Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation," "corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A word "chartered," "professional association," or the abbreviation "P.A."  B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
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 in F	iarida enter the name of the
new registered agent and/or the new registered office address:  Name of New Registered Agent  A 435 NE U  (Florida street address)	sphakdy In Place.
New Registered Office Address: (Ufle COYAL (City)	, Florida <u>D 970 /</u> (Zip Code)
New Registered Agent's Signature, if changing Registered Agent:	
I hereby accept the appointment as registered agent. I am familiar with and	accept the obligations of the position.
Signature of New Registered	d 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 <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: X Change	PT John	Doe	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
_X Add	SV Sally	<u>/ Smith</u>	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	0	Brittany B. Terler	H. Myers, T.
Add Remove		1	H. Myers, 12. 33913
2) Change	<u> </u>	John C. Terlep	11010 Championship De 14, Myers Fr
Add Remove	$\odot$		33913
3) Change Add	<u>T</u>	Chankila Vong phal	Cape Coval, Fr
Remove			33909
4) Change			<del></del>
Add Remove			
5) Change	**************************************		
Add			
Remove			
6) Change			
Add			
Remove			

. <u>If ame</u> (Attach	nding or adding additional Artic additional sheets, if necessary).	cles, enter change (Be specific)	(s) here:		
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prov	amendment provides for an exchisions for implementing the amerif not applicable, indicate N/A)	ndment if not con	tion, or cancellati tained in the ame	on of issued share ndment itself:	es.
	V	NIA			
	·				
				<del> </del>	
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		<del></del>			
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The date of each amendment(s) adoption:	, if other than the
Effective date if applicable: 12/31/16  (no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will document's effective date on the Department of State's records.	not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. 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)	
(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.	
Dated 12/29/16	
Signature (By a director, president or other officer – if directors or officers have not been	
selected, by an incorporator - if in the hands of a receiver, trustee, or other court	
appointed fiduciary by that fiduciary)	
Chankila Vongphakdy (Typed or printed name of person signing)	
President (Title of person signing)	
( title of betson signing)	

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