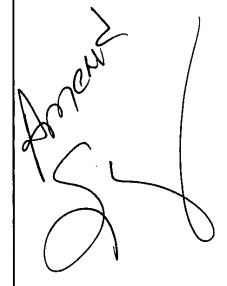
# PO 20005 7349

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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#### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORI	PORATION:	Passion Salon & Spa, Ir	IC.
DOCUMENT NUMBER:		P02000057349	
The enclosed Artic	cles of Amendment and fee a	re submitted for filing.	
Please return all co	orrespondence concerning thi	s matter to the following:	
		nda L. Nelson, CPA	
	N	lame of Contact Person	
	Sa	ndy & Nelson, P.A.	
		Firm/ Company	
	5	0 Leanni Way C-2	
		Address	<del>.</del>
	Pa	lm Coast, Fl. 32137	
		ity/ State and Zip Code	
	E-mail address: (to be use	d for future annual report notification)	
For further informa	ation concerning this matter,	please call:	
	inda L. Nelson	at (386)44	5-4375
Name	of Contact Person	Area Code & Daytime Tele	ephone Number
Enclosed is a chec	k for the following amount n	nade payable to the Florida Depart	ment of State:
☑ \$35 Filing Fee	□ \$43.75 Filing Fee & Certificate of Status	\$\Bigsquare\ \$\\ \text{Certified Copy}  (Additional copy is enclosed)	☐ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address 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	, e

Tallahassee, FL 32301

#### Passion Salon and Spa, Inc. 9E Palm Harbor Village Way Palm Coast, FL 32137 386-445-5848

July 23, 2010

Florida Department of State **Division of Corporations** PO Box 6327 Tallahassee, FL 32314

Dear Florida State Agent,

We are sending this package in one bundle as we would like each form processed in order.

Our goal is to return the corporation to its original status with Ms. Barbosa as Registered Agent, FEIN number and Document Number. Then dissolve the corporation. Releasing the name "Passion Salon & Spa." Then Ms. Tran would like to apply for a new corporation in the name of "Passion Salon & Spa, Inc., with her as Registered Agent, new FEIN number and new Document number so she can get her state reporting done under the new corporation.

We have enclosed the following paperwork to be processed in the order below;

- 1. File First -Form CR2E011-Articles of Amendment.
- 2. File Second-Letter Releasing the Name and Form CR2E012-Articles of Dissolution, dissolving the corporation.
- 3. Form CR2E010-Create a New Profit Corporation for "Passion Salon & Spa, Inc" with Angela Tran as Registered Agent, creating a New Document Number and the EIN 27-2195917.

Thank you for your help in this matter.

Yours truly,

Susie Cook

Bookkeeper

Please Call us if you have questions. Susie Cook Cell - 386-237-0664

Or ancela Tran at # about

### **Articles of Amendment Articles of Incorporation**

## Passion Salon & Spa, Inc.

• •		corporation  f. A. Inc.  h the Florida Dept. of State)
•	Articles of A	Amendment
	to Articles of Inc	corporation
	of	torporation 75% 26
Desein		TLANDAM PM 2
	n Salon & Sp	a, Inc.
•		h the Florida Dept. of State)
	02000057349	9 ""4
(Document )	Number of Corpora	ation (if known)
ersuant to the provisions of section 607.1 nendment(s) to its Articles of Incorporation		utes, this Florida Profit Corporation adopts the following
If amending name, enter the new nam	e of the corporati	ion:
		The new
ime must contain the word "chartered," "  Enter new principal office address, if a  Principal office address MUST BE A STR	pplicable:	9-D Palm Harbor Village Way
Enter new mailing address, if applica (Mailing address MAY BE A POST OF		9-D Palm Harbor Village Way Palm Coast, Fl. 32137
If amending the registered agent and/onew registered agent and/or the new remains and the new registered Agent:		
	9-D Palm H	larbor Village Way
New Registered Office Address:		orida street address)
•	Palm Coast	Fla.::J. 22127
•	(City	,
	(3.9	, , , , , , , , , , , , , , , , , , , ,
ew Registered Agent's Signature, if char		
hereby accept the appointment as registere	ea agent. I am fan	miliar with and accept the obligations of the position.
X	150	sh_

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)

<u>Title</u>	<u>Name</u>	Address_	Type of Action
Miss	Angela Tran	9-E Palm Harbor Village Way Palm Coast, Fl. 32137	_ □ Add □ □ Remove
<u>Près</u>	Maria Barbosa	9-D Palm Harbor Village Way Palm Coast, FL 32137	_ ☑ Add _ □ Remove
			_ ☐ Add _ ☐ Remove
(attach a	ding or adding additional Articles dditional sheets, if necessary). (E	Be specific)	
provisi		nge, reclassification, or cancellation of is nent if not contained in the amendment	

The date of each amendment	(s) adoption: July 23, 2010
	(date of adoption is required)
Effective date if applicable:	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/we by the shareholders was/we	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.
	re approved by the shareholders through voting groups. The following statemened 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.	re adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/we action was not required.	re adopted by the incorporators without shareholder action and shareholder
Dated	7/23/10
sele	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 ointed fiduciary by that fiduciary)
	MARIA PIND BACBOSA (Typed or printed name of person signing)
	(Title of person signing)