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JUN 08 2017

R. WHILL

## **COVER LETTER**

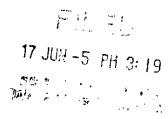
TO: Amendment Section

**Division of Corporations** Breeze Laser Center, Inc. NAME OF CORPORATION: P03000074630 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Elham Miraliakbari Name of Contact Person Belle Aesthetics, Inc. Firm/ Company 8755 The Esplanade Address Orlando, FL 32836 City/ State and Zip Code elham97@aol.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Elham Miraliakbari Area Code & Daytime Telephone Number Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: □\$52.50 Filing Fee **\$35** Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy (Additional Copy enclosed) is enclosed) Street Address **Mailing Address** Amendment Section Amendment Section Division of Corporations Division of Corporations Clifton Building P.O. Box 6327

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

## Articles of Amendment to Articles of Incorporation of



, Florida\_\_\_

(Name of Corporation as currently filed with the Florida Dept. of State) P03000074630 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: Belle Aesthetics, Inc. name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." 8755 The Esplanade, #114 B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Orlando, FL 32836 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 Florida, enter the name of the new registered agent and/or the new registered office address: 8755 The Esplanade, #114 Name of New Registered Agent

New Registered Agent's Signature, if changing Registered Agent:

New Registered Office Address:

Orlando

Breeze Laser Center, Inc.

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

(Florida street address)

(City)

## 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 Do	<u>oc</u>			
X Remove	<u>v</u>	Mike Jones				
X Add	<u>sv</u>	Sally Sr	<u>nith</u>			
Type of Action (Check One)	Title		Name	<u>Addres</u> s		
1) Change		<u>.</u>	N/A			
Add						
Remove						
2) Change	·	_				
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Remove						
3 ) Change	<del></del>	_				
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Remove						
4) Change		<del></del>				
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5) Change		_				
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6) Change						
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Add						
Remove						

Common and mount queers, it necessarily.	ticles, enter change(s) here: . (Be specific)
ame change and registered agent address	s, only!
·	
-	
If an amendment provides for up eve	change, reclassification, or cancellation of issued shares,
provisions for implementing the am	nendment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
'A	
Λ	
Λ	
A	
Α	
Α	
A	
/A	

The date of each amendment(s) adoption:	_, if other than the
Effective date if applicable:	
(no more than 90 days after amendment file date)	<del></del>
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will a document's effective date on the Department of State's records.	not be listed as the
Adoption of Amendment(s) ( <u>CHECK ONE</u> )	
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.	
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)	
Elham Miraliakbari	
(Typed or printed name of person signing)	
President/CEO	
(Title of person signing)	<del></del>