P0300081045

(Re	questor's Name)	
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(Ad	dress)	
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(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	i i
Certified Copies	_ Certificate:	s of Status
Special Instructions to	Filing Officer:	
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amend

JUN 1 9 2012 T. LEWIS

COVER LETTER

TO: Amendment Section

Division of Corp	porations				
NAME OF CORPO	RATION: ACQUALU	NA SALON INC			
	D0200000445				
DOCUMENT NUM	BER: 1 0300000143				
The enclosed Article	s of Amendment and fee are sul	bmitted for filing.			
Please return all corre	espondence concerning this mat	tter to the following:			
	JOANN				
		Name of Contact Persor	1		
	ACQUALUNA SA	LON INC			
		Firm/ Company			
	1913 PONCE DE	LEON BLV			
		Address			
	CORAL GABLES	FL 33134			
		City/ State and Zip Code	e		
JC	ANN.GONZALEZ	@ROCKETMAⅡ	COM		
		sed for future annual report			
	•				
For further information	on concerning this matter, pleas	se call:			
JOANN		at (786	4445001		
Name of Contact Person		Area Code & Daytime Telephone Number			
Enclosed is a check t	for the following amount made	payable to the Florida Depa	artment 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)		
<u>M</u> :	ailing Address	Street	Address		
₊Ār	nendment Section	Amendment Section			
	vision of Corporations O. Box 6327		on of Corporations Building		
P.O. BOX 0327 Tallahassee, FL 32314		Clifton Building 2661 Executive Center Circle			

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



A COLIAL LINIA CAL ON INC	CLAHASSCEGELON
AUGUALUNA UALUNINU.	
(Name of Corporation as currently filed with the Florida Dept. of State) P030008145	
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the folits Articles of Incorporation:	lowing 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," "company," or "incorporated" or "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc," or "Co". A professional corporation name word "chartered," "professional association," or the abbreviation "P.A."	the abbreviation must contain the
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 Florida, enter the name of the new registered agent and/or the new registered office address:	
Name of New Registered Agent JOANN GONZALEZ	
1913 PONCE DE LEON BLV	
(Florida street address)	
New Registered Office Address; CORAL GABLES FL 33134, Florida	
(City) (Zip Co. 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 pos	ition.
Signature of New Registered Assent, 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: XChange	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	ı
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
I) Change Add Remove	P	LIVIERO, DOMENICO D	1913 PONCE DE LEON BLV CORAL GABLES,FL 33134
2) Change Add Remove	P	JOANN GONZALEZ	1913 PONCE DE LEON BLV CORAL GABLES,FL 33134
3) Change	VP	CARMEN PATRIA ROSADO	1913 PONCE DE LEON BLV CORAL GABLES,FL 33134
4) Change Add Remove			
5) Change Add Remove			
6) Change Add Remove		· · · · · · · · · · · · · · · · · · ·	<u>. </u>

attach ad	<mark>ing or adding addi</mark> Iditional sheets, if n	ecessary).	(Be specific)	nge(s) here.			
· · · · · · · · · · · · · · · · · · ·	**				_		<u></u>
 							
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If an ame	endment provides ons for implementi	for an excha	nge, reclassi	fication, or ca	ncellation of i	issued shares. at itself:	ı
(if n	not applicable, indic	ate N/A)					
				· · · · · · · · · · · · · · · · · · ·			
			,				
							
							
	<u></u>						

The date of each amendment(s) adoption: JUNE 14,2012				
Effective date if applicable:	JNE 14,2012			
<u></u> .	(no more than 90 days after amendment file date)			
Adoption of Amendment(s)	(<u>CHECK ONE</u>)			
The amendment(s) was/were ad by the shareholders was/were so	opted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.			
	proved by the shareholders through voting groups. The following statement reach 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)			
action was not required. The amendment(s) was/were ad action was not required. Dated JUNE Signature (By a selected)	opted by the board of directors without shareholder action and shareholder opted by the incorporators without shareholder action and shareholder 14,2012 director, president or other officer – if directors or officers have not been ed, by an incorporator if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)			
	JOANN GONZALEZ			
	(Typed or printed name of person signing)			
	PRESIDENT			
	(Title of person signing)			