04000108410

(Re	questor's Name)	,
(Ad	dress)	<u> </u>
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(1.4	u	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu:	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to I	Filing Officer:	2 Pages
<u> </u>		

Office Use Only



12/22/10--01017--007 **35.00

JAN 11 2011

EXAMINER

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF COR	PORATION: _	RESTYLER	SAF	TERM	ARKE	T SPE	CIALIST, INC	
DOCUMENT NU	J MBER:			P04	00010	8410		
The enclosed Artic	cles of Amendn	nent and fee are	submitte	ed for fi	ling.			
Please return all co	orrespondence o	oncerning this n	atter to	the fol	lowing:			
				LRICH				
		Name	of Cont	act Perso	n			
	RESTYLERS AFTERMARKET SPECIALIST							
		t	'irm/ Cor	npany				
		316 RAC						
				ess ;		•		
		FORT WALT	ON BE	EACH,	FL 3254	16 : 17 17		
• • • •	. •	City/	State and	l Zip Cod	le`			
	E-mail ad	JOSH@REST fress: (to be used fo	YLER:	SINC.C	OM port notific	cation)		
For further informa	ation concernin	o this matter inle	ase call	•				
	OSH ULLRICI	•	at (050	`	68	5-4041	
	of Contact Person		_ at (de & Day	time Tele	phone Number	
Enclosed is a checl	k for the follow	ing amount made	e payab	le to the	Florida	Departr	nent of State:	
✓ \$35 Filing Fee	□\$43.75 Fili Certificate		Cer	.75 Filing tified Co ditional c		losed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is end	closed)
Mailing Address		_	t Addre		-4			
Amendmen	t Section Corporations	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			Section Corporation	one		
P.O. Box 6				n Build	•	OHS		
P.U. B0X 0327 Tallahassee Fl 32314				uig ve Cente	er Circle			

Tallahassee, FL 32301

то:

COVER LETTER

Amendment Section Division of Corporations

SUBJECT: Restyler Aftermarket Specialist

DOCUMENT NUMBER: PO 4000 108 410

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Name of Contact Person

Restylors Acter Market Specialist

Firm/Company

316 N.W. Racetrach RD.

Address

Ft. Waltan Rch FC 32547

City/State and Zip Code

Tosh Restylersing. Com

E-mail address: (to be used for future annual report notification)

Restylors Acter Market Specialist

Restylors Acter Market Special Special Special S

For further information concerning this matter, please call:

Josh Wame of Contact Person at (850) 796 7274

Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

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
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

December 27, 2010

JOSH ULLRICH RESTYLERS AFTERMARKET SPECIALISTS, INC. 316 RACETRACK RD., NW FT WALTON BEACH, FL 32547

SUBJECT: RESTYLERS AFTERMARKET SPECIALIST, INC.

Ref. Number: P04000108410

We have received your document for RESTYLERS AFTERMARKET SPECIALIST, INC. and your check(s) totaling \$35.00. However, the document has not been filed and is being retained in this office for the following:

The first page of the amendment form is missing. Please check and see if you just failed to send with the rest of your package. The form would have the place at the top of the page for the name of the corporation. If you do not have that page, you will need to download a copy and send the 1st page of the form and I will put the rest of the pages together with that one and get them filed for you.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6903.

Cheryl Coulliette Regulatory Specialist II

Letter Number: 910A00029767

Articles of Amendment to Articles of Incorporation

, , , , , , , , , , , , , , , , , , ,	Articles of Incorporation	
_	of	
Restriess	Afternancet Specialist I	
(Name of Corporation as cu	urrently filed with the Florida Dept. of State)	, _
P041001	08410	
(Document)	Number of Corporation (if known)	
Pursuant to the provisions of section 607.	1006, Florida Statutes, this Florida Profit Corporation adopts the	following
A. If amending name, enter the new nam	. ,	men
abbreviation "Corp.," "Inc.," or Co.," or	in the word "corporation," "company," or "incorporated" or the designation "Corp," "Inc," or "Co". A professional corpora professional association," or the abbreviation "P.A."	the viion
B. Enter new principal office address, if a (Principal office address MUST BE A STE		
C. Enter new mailing address, if applica (Mailing address <u>MAY BE A POST OF</u>		11 JAN I I AI
D. If amending the registered agent and/ new registered agent and/or the new t	for registered office address in Florida, enter the name of the registered office address:	AHII: 50
Name of New Registered Agent:		
New Registered Office Address:	(Florida street address)	
The same of the sa	-	
	(City) (Zip Code)	
New Registered Agent's Signature, if cha	inging Registered Agent:	
I hereby accept the appointment as register	red agent. I am familiar with and accept the obligations of the posit	ion.
	Signature of New Registered Agent, if changing	
	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>Tit</u>	<u>le</u>	Name	Address	Type of Action
	VP	TEENA ULLRICH	827 CROSS ST. DESTIN, FL 32	☑ Add □ Remove
				. □ Add [1] Remove
				☐ Add ☐ Remove
		or adding additional Articles, enter chional sheets, if necessary). (Be specific,		
F.	provisions i	dment provides for an exchange, reclas for implementing the amendment if not pplicable, indicate N/A)	sification, or cancellation of issu t contained in the amendment its	ed shares, self:
	-			
			,	

The date of each amendment(s)	edontion: 12/18/10
Effective date if applicable	(date of adoption is required)
(ne	o more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were as by the shareholders was/were s	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.
	pproved by the shareholders through voting groups. The following statemen 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	ting group)
(vo	ting group)
The amendment(s) was/were action was not required.	dopted by the board of directors without shareholder action and shareholder
The amendment(s) was/were action was not required.	dopted by the incorporators without shareholder action and shareholder
Dated/	2/18/10
Signature	/sh (////2/
(By a di	rector, president or other officer – if directors or officers have not been l, by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)
/	Josh (9) N'(1
-	(Typed or printed name of person signing)
(President
_	(Title of person signing)