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PICK-UP	☐ WAIT	MAIL
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SECRETARY OF STATE

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: Day SPA IT'S ALL ABOUT YOU IN
DOCUMENT NUMBER: PD5 DPD021468
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Mnastasiua Trushro (Name of Contact Person)
Day spa It's all about you INC (Firm/ Company)
1434 Collins Ave # 400 (Address)
Miami Beach FL 33/39 (City/ State/ and Zip Code)
For further information concerning this matter, please call:
Daniel Crux at (305) 216-8351 (Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
□ \$35 Filing Fee  Certificate of Status  (Additional copy is enclosed)  Certificate of Status  Certified Copy (Additional Copy is enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327409 E. Gaines Street

Tallahassee, FL 32399

Tallahassee, FL 32314

Articles of Amendment to Articles of Incorporation of

## Day spa IT's all about you INC (Name of corporation as currently filed with the Florida Dept. of State)

Document number of corporation (if known)
(Document number of corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> dopts the following amendment(s) to its Articles of Incorporation:
NEW CORPORATE NAME (if changing):
Must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.")  A professional corporation must contain the word "chartered", "professional association," or the abbreviation "P.A.")
AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: (BE SPECIFIC)
Add ANASTASIYA TRUSHKO AS ANVROFFICER IN
DAY SPA IT'S ALL ABOUT YOU INC.
offichess: 945 MERIDIAN AVE #4 Miami BEACH
FL. 33139
(Attach additional pages if necessary)
f an amendment provides for exchange, reclassification, or cancellation of issued shares, provisions or implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A

(continued)

The date of each amendment(s) adoption: $03/84/2005$
Effective date if applicable: (no more than 90 days after amendment file date)
(no more than 90 days after amendment file date)
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were approved 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)
☐ 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 brector, 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)
(Typed or printed name of person signing)
PRESIDENT (Title of person signing)

FILING FEE: \$35