P05000078268

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: FACE HOLDING)S II, INC.	
	BER: P05000078268		
	of Amendment and fee are so	abmitted for filing.	
Please return all corre	spondence concerning this ma	ntter to the following:	
	Thomas J. Palmieri, Esq.		
		Name of Contact Perso	n
	Thomas J. Palmieri, P.A.		
		Firm/ Company	
	340 Minorca Ave., Suite 1		
		Address	
	Coral Gables, FL 33134		
		City/ State and Zip Cod	c
	meram891@yahoo.es		
	E-mail address: (to be u	sed for future annual report	notification)
For further informatio	n concerning this matter, plea		441-0021
	of Contact Person	at (305	de & Daytime Telephone Number
Name o	of Contact Person	Area Co	de & Daytime Telephone Numbei
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	artment of State:
S35 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)
Ame Divi P.O.	ling Address ndment Section sion of Corporations Box 6327 thassee, FL 32314	Amend Divisio The Co 2415 N	Address ment Section n of Corporations entre of Tallahassee V. Monroe Street, Suite 810 ssee, FL 32303

Articles of Amendment to Articles of Incorporation of

FACE HOLDINGS II, INC.	
(Name of Corporation as currently filed with the	Florida Dept. of State)
P05000078268	
(Document Number of Corporation (if	known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Co</i> its Articles of Incorporation:	orporation adopts the following 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 "in "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional education," or the abbreviation "P.A."	corporated" or the abbreviation "Corp.,"
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
	20
	
C. Enter new mailing address, if applicable: (Mailing address MAY BEA POST OFFICE BOX)	[;
D. If amending the registered agent and/or registered office address in Florida, c	enter the name of the
new registered agent and/or the new registered office address:	" ©
Name of New Registered Agent	
	• • • • • • • • • • • • • • • • • • • •
(Florida street address)	
New Registered Office Address: (City)	, Florida (Zip Code)
(Cayy	(zip Cone)
New Registered Agent's Signature, if changing Registered Agent:	
I hereby accept the appointment as registered agent. I am familiar with and accept the	ne obligations of the position.
Signature of New Registered Agent,	if changing

Check if applicable \square The amendment(s) is/are being filed pursuant to s, 607.0120 (11) (e), F.S.

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:

<u>⊼</u> Change	12.1	John Doc	
X Remove	<u>Y</u> .	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) X Change	<u>v</u>	Armando Fachado, Jr.	7741 NW 175 Street
Add			Hialcah, FL 33015
Remove			
2) Change		<u> </u>	
Add			
Remove 3) Change		_	
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
O Change			
Add			
Remove			

E. If amending or adding additional Arti (Attach additional sheets, if necessary).	(Be specific)
None	
	1
	· · · · · · · · · · · · · · · · · · ·
If an amendment provides for an excha-	nge, reclassification, or cancellation of issued shares,
provisions for implementing the amen-	dment if not contained in the amendment itself:
(if not applicable, indicate N/A)	The solution of the amendment usen:
7A	

.

The date of each amendment(s) date this document was signed.	adoption:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the	block does not meet the applicable statutory filing requirements, Department of State's records.	this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were a action was not required.	dopted by the incorporators, or board of directors without sharehold	ler action and shareholder
The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes east for the amen sufficient for approval.	dment(s)
☐ The amendment(s) was/were a must be separately provided for	pproved by the shareholders through voting groups. The following or each voting group entitled to vote separately on the amendment(.	statement s):
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	
by	"	
,	(voting group)	
June 16, : Dated	2020	
Signature	Tahl	
select	director, president or other officer — if directors or officers have no ed, by an incorporator — if in the hands of a receiver, trustee, or oth nted fiduciary by that fiduciary)	
	Armando Fachado	
	(Typed or printed name of person signing)	· · · · · · · · · · · · · · · · · · ·
	President and Director	
	(Title of person signing)	