P06000014055

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SECRETARY OF STATE DIVISION OF CORPORATIONS

V HERRING MAY - 3 2017

COVER LETTER

TO: Amendment Section

Division of Corporations

Tallahassee, FL 32314

D'Caballeros Barber Shop Group Inc. NAME OF CORPORATION: P06000014055 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Guillermo Galvan Name of Contact Person ACCTAX Accounting & Tax Services Firm/ Company 7828 NW 44 St. Suite B Address Lauderhill FL 33351 City/ State and Zip Code ataxser@yahoo.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (954) 839.7013

Area Code & Daytime Telephone Number Guillermo Galvan Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: 影 \$35 Filing Fee **\$**43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 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 P.O. Box 6327 Clifton Building

> 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

2017 MAY - 1 PM 3: 44

to

D'Caballeros Barber Shop Group Inc.	,
(<u>Name of Corporatio</u>	on as currently filed with the Florida Dept. of State)
P06000014055	
(Docum	ent Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	Statutes, this Florida Profit Corporation adopts the following amendment(s
A. If amending name, enter the new name of the con	rporation:
	The new
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp, word "chartered," "professional association," or the c	d "corporation," "company," or "incorporated" or the abbreviation " "Inc," or "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADD	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO)	Υ)
(Figuring address MAT BE AT OST OTTICE BOX	
D. If amending the registered agent and/or registered new registered agent and/or the new registered of	
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Regi I hereby accept the appointment as registered agent.	istered Agent: I am familiar with and accept the obligations of the position.
Signa	tture of New Registered Agent, if changing

If amending the Officers and/or Directors, enter the fitle 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.

X Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	DCP	Mendez Alexander R	7532 NW 86 Terrace Apt-104
Add			Tamarac FL 33321
X Remove			
2) Change			
Add			
Remove			
3) Change			
Add .			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
Article III
Minimun Capital
The Capital Stock is \$1,000.00, with 100 shares, price \$10.00 each share.
Edison Perez is owner of the 100 shares.
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:
(if not applicable, indicate N/A)

04/18/2017	
The date of each amendment(s) adoption:	, if other than the
04/18/2017	
Effective date if applicable: (no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this document's effective date on the Department of State's records.	date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment by the shareholders was/were sufficient for approval.	if(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following state must be separately provided for each voting group entitled to vote separately on the amendment(s):	ment
"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 shareho action was not required.	lder
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
04/19/17 Dated	
Signature William.	
(By a director, president or other officer – if directors or officers have not bee 'selected, by an incorporator – if in the hands of a receiver, trustee, or other ecappointed fiduciary by that fiduciary)	
Edison Perez	
(Typed or printed name of person signing)	
DCPS	
(Title of person signing)	