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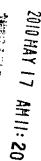
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COVER LETTER

TO: Amendment Section

Division of Corporations		
NAME OF CORPORATION:	by rachel Inc.	
DOCUMENT NUMBER: POGOO	0017895	
The enclosed Articles of Amendment and fee are	submitted for filing.	
Please return all correspondence concerning this r	natter to the following:	
Rachel T	ne of Contact Person	
nails by	Firm/Company	
4550 Lant	tana Rd. Ste. A.3	
Lalle Wo	4h FL 33463 State and Zip Code	
nails by rack	nel a bell south. net	
For further information concerning this matter, please call:		
Rachel DaviS Name of Contact Person	at (Sld) 642-6555 Area Code & Daytime Telephone Number	
Enclosed is a check for the following amount mad	le payable to the Florida Department of State:	
□ \$35 Filing Fee & Certificate of Status	\$\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\square\	
Mailing Address	Street Address	
Amendment Section	Amendment Section	
Division of Corporations P.O. Box 6327	Division of Corporations Clifton Building	
Tallahassee, FL 32314	2661 Executive Center Circle	

Tallahassee, FL 32301

Articles of Amendment

to

Articles of Incorporation of

nails by rached	2 Inc.
(Name of Corporation as currently filed with the	he Florida Dept. of State)
P0600013	1895
(Document Number of Corporation	on (if known)
Pursuant to the provisions of section 607.1006, Florida Statute amendment(s) to its Articles of Incorporation:	es, this Florida Profit Corporation adopts the following
A. If amending name, enter the new name of the corporation	LE AIA The new 8
name must be distinguishable and contain the word "corpo	
abbreviation "Corp.," "Inc.," or Co.," or the designation "Coname must contain the word "chartered," "professional associations of the contain	
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	nA
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NA
D. If amending the registered agent and/or registered office a new registered agent and/or the new registered office add	
Name of New Registered Agent:	nlet
New Registered Office Address: (Florid	la street address)
	, Florida
(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Ag	ent:
I hereby accept the appointment as registered agent. I am famili	iar with and accept the obligations of the position.
Signature of New I	Registered Agent, if changing

removed and title, name, and address of each Officer and/or Director being added: (Attach additional sheets, if necessary) ☐ Add □ Remove E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific) 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)

If amending the Officers and/or Directors, enter the title and name of each officer/director being

The date of each amendment(s) adoption: 5/17/10	
(date of adoption is required)	
Effective date if applicable: (no more than 90 days after amendment file date)	
(no more man > augu agres amonamentyne auto)	
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.	ıt(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):	men
"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 shareholder action was not required.	der
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Signature (By a director, 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 cour appointed fiduciary by that fiduciary)	t
Pachel C. Davis (Typed or printed name of person signing)	
President (Title of person signing)	