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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORP	ORATION: SEMINOLA	A DISCOUNT BEAUTY SU	JPPLIES, COR
DOCUMENT NU	MBER:	P06000023706	
The enclosed <i>Artic</i>	les of Amendment and fee ar	e submitted for filing.	
Please return all co	rrespondence concerning this	s matter to the following:	
	PABL	O MIGUEL BROCHE	
	N	ame of Contact Person	
	SEMINOLA DISCO	UNT BEAUTY SUPPLIES, CO	RP.
		Firm/ Company	
_	190 EAST	7TH STREET, APT. 101	
		Address	
		ALEAH, FL 33010	
	Ci	ty/ State and Zip Code	
		TRE@YAHOO.COM If for future annual report notification)	
For further informa	ation concerning this matter,	please call:	
		at (786)41	6-4146
Name	of Contact Person	Area Code & Daytime Tele	ephone Number
Enclosed is a checl	k for the following amount m	ade payable to the Florida Depart	ment of State:
□ \$35 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)
P.O. Box 6	t Section Corporations	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle	ė

Tallahassee, FL 32301

Articles of Amendment to **Articles of Incorporation** of

FILED

SEMINOLA DISCOUNT BEAUTY SUPPLIES, CORP.

2010 HOV -4 PH 443

(Name of Corporation as currently filed with the Florida Dept. of State)

SEGRETARY OF STATE TALLAHASSEE FLORIDA

P06000023706

(Document Number of Corporation (if known)

	of the corporation:	The n
me must be distinguishable and contain breviation "Corp.," "Inc.," or Co.," or th me must contain the word "chartered," "pr	e designation "Corp," "Inc,	"company," or "incorporated" or t " or "Co". A professional corporati
Enter new principal office address, if ap rincipal office address MUST BE A STRE		
men vijice univers <u>meet bis men en e</u>		
Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF		
		· · · · · · · · · · · · · · · · · · ·
If amending the registered agent and/or new registered agent and/or the new reg		Florida, enter the name of the
		Florida, enter the name of the
new registered agent and/or the new reg		Florida, enter the name of the
new registered agent and/or the new reg		
new registered agent and/or the new reg	istered office address:	

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>Title</u>	<u>Name</u>	Address	Type of Action
<u> </u>	EDEL BROCHE	190 EAST 7TH STREET APT. 101 HIALEAH, FL 33010	☐ Add ☐ ☑ Remove
			
			Add Remove
(attach a ALSO, M	ding or adding additional Articles, entendational sheets, if necessary). (Be specified of the specified of t	ecific) S:	
<u>provisi</u>	mendment provides for an exchange, ions for implementing the amendment not applicable, indicate N/A)		

The date of each amendmen	t(s) adoption: NOV. 01, 2010
Effective date <u>if applicable</u> :	NOV 01 2010 (date of adoption is required)
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
	ere adopted by the shareholders. The number of votes cast for the amendment(s) vere sufficient for approval.
The amendment(s) was/we must be separately provid	ere approved by the shareholders through voting groups. The following statement led for each voting group entitled to vote separately on the amendment(s):
	s cast for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
The amendment(s) was/wation was not required.	ere adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/waction was not required.	ere adopted by the incorporators without shareholder action and shareholder
Dated/	1-02-2010
Signature _	1-02-2010 Ubroche
(B	y a director, president or other officer – if directors or officers have not been
	ected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)
	PABLO MIGUEL BROCHE
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)
	(Title of person signing)