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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : NEW START BUSINESS SOLUTIONS INC

Account Number : I20130000079 Phone : (305)804-1047 Fax Number : (866)767-7835

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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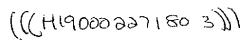
COR AMND/RESTATE/CORRECT OR O/D RESIG CHROMA BODY SHOP INC.

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Help

Articles of Amendment ю Articles of Incorporation



CHROMA BODY SHOP INC.	of	
	Corporation as currently filed with the Florida	
206000057488	Corporation as currently med with the Florida	Dept. of State)
	(Document Number of Corporation (if known)	
ursuant to the provisions of section 607.10 s Articles of Incorporation:	006, Florida Statutes, this <i>Florida Profit Corporatio</i>	on adopts the following amendment(s)
. If amending name, enter the new nam	ne of the corporation:	
ame must be distinguishable and contac Corp.," "Inc.," or Co.," or the designat ord "chartered," "professional association	in the word "corporation," "company," or "ince tion "Corp," "Inc," or "Co". A professional corp on," or the abbreviation "P.A."	The new orporated" or the abbreviation porution name must contain the
Enter new principal office address, if Principal office address MUST BE A STR	applicable: REET ADDRESS)	
Enter new mailing address, if applica (Mailing address MAYBE A POST OF	ble: FFICE BOX)	
new registered agent and/or the new r	or registered office address in Florida, enter the registered office address:	
_	(Florida street address)	
New Registered Office Address:	(City)	, Florida
	(City)	(Zip Code)
w Registered Agent's Signature, if chan ereby accept the appointment as registere	nging Registered Agent: d agent. I am familiar with and accept the obligati	ons of the position.
	Signature of New Registered Agent, if changing	FILE SCORE JARY OF
	Page 1 of 4	STATE PLONIO

Fax: 18667677835 To: Sunbiz Corp & Inc Fax: (850) 617-6380

Page: 5 of 5

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. If amending or adding additional Arti	latan makan aka sa sa s	(((H19 000 32 7180 3))
(Attach additional sheets, if necessary).	(Be specific)	
	(40 0,020,000)	
		
	- -	
		
-		
	<u> </u>	
If an amendment provides for an excha-	ige, reclassification, or cance	ellation of issued shares,
provisions for implementing the amend (if not applicable, indicate N/A)	Iment Il not contained in the	amendment itself:
·		
		
	<u></u>	

Ta: Sunbiz Corp & Inc

Fax: (850) 617-6380

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(((H19000 227 180 3)))

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.

X Change	<u> FI.</u>	John Doc			
X Remove	\underline{V}	Mike Jones			
X Add	<u>sv</u>	Sally Smith			
Type of Action (Check One)	<u>Title</u>	Name	<u>∧ddres</u> s		
1) Change	VP	GEAN A MORALES	3020 NW 23 TERR		
X Add			MIAMI, FL 33142		
Remove					
2) Change					
Add					
Кеточе					
3) Change					
Add			-		
Remove					
4) Change					
Add					
Remove					
5) Change					
Add					
Remove					
_					
6) Change					
Add					
Remove					

From: Hector Rodriguez	Fax: 18667677835	To: Sunbiz Corp & Inc	Fax: (850) 617-6380	Page: 2 of 5 07/29/2019 8:55 PM
			((H1	9000247(80 3)))
	ach amendment(s) ad ment was signed.	option:		, if other than the
St. Commission of the state of				
Ellective date	if applicable:	(no more than	90 days after amendment fi	le date)
Note: If the document's ef	date inserted in this bleetive date on the Dep	lock does not meet the application of State's records.	licable statutory filing requi	rements, this date will not be listed as the
Adoption of A	amendment(s)	(CHECK ONE)		
The amend by the share	ment(s) was/were ado eholders was/were suf	pted by the shareholders. The ficient for approval.	ne number of votes cast for t	he amendment(s)
☐ The amend must be sep	ment(s) was/were appi parately provided for a	roved by the shareholders the each voting group entitled to	rough voting groups. The fo o vote separately on the ame	ollowing statement indment(s):
"The	number of votes cast f	or the amendment(s) was/we	ere sufficient for approval	
by		(voting group)		
. –		(voting group)	·	
The amenda action was a	ment(s) was/were ador not required.	oted by the board of director	s without shareholder action	and shareholder
The amenda action was a	nent(s) was/were adop not required.	oted by the incorporators wit	hout shareholder action and	sharcholder
	07-29-2019 Dated			
	Signature			
	(By a dir selected,	ector, president or other offi by an incorporator – if in the d fiduciary by that fiduciary	e hands of a receiver, trusted	have not been e, or other court
	1	MICHEL PANTOJA		
	-	(Typed or printed	name of person signing)	
		Michel Panton	2	
	_	(Title	of person signing)	