P06000107743

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

X8/12

COVER LETTER

TO: Amendment Section Division of Corporations

Division of Corporations		
NAME OF CORPORATION: SANTA	A UNISEX INC	
DOCUMENT NUMBER: P060001		
The enclosed Articles of Amendment and fee	are submitted for filing.	
Please return all correspondence concerning th	is matter to the following:	
Domingo A	binader	
	Name of Contact Person	n
AB Multi Se	ervices and Inco	me Taxes
	Firm/ Company	
8751 Comn	nodity Cir Suite	7
Orlanda El	Address	
Orlando, Fl		
	City/ State and Zip Cod	
abmultiservice	s1@yahoo.com	
E-mail address: (to	be used for future annual report	notification)
For further information concerning this matter,	, please call:	
Domingo Abinader	_{at (} 407	, 601-6524
Name of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for the following amount r	made payable to the Florida Dep	artment of State:
■ \$35 Filing Fee □\$43.75 Filing Fe Certificate of Sta		☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address		Address
Amendment Section (Division of Corporations		lment Section on of Corporations

Amendment Section (Division of Corporations P.O. Box 6327 'Tallahassee, FL 32314

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED SECRETARY OF STATE TALLANDSSEE, FLORIDA

SANTA UNISEX INC

13 AUG -5 AM 8: 43

(Name of Corporation as currently filed with the Flo	orida Dept. of State)		
(Document Number of Corporation (if	known)		
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>F</i> its Articles of Incorporation:	Ilorida Profit Corporation adopts the following amendment(s) to		
A. If amending name, enter the new name of the corporation: Santa Barber Shop Inc			
name must be distinguishable and contain the word "corporation, "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Coword "chartered," "professional association," or the abbreviation "F	o". A professional corporation name must contain the		
B. Enter new principal office address, if applicable:	1901 South john Young Prky Unit 105		
(Principal office address MUST BE A STREET ADDRESS)	Kissimmee, FL 34741		
C. Enter new mailing address, if applicable:	1901 South john Young Prky Unit 105		
(Mailing address MAY BE A POST OFFICE BOX)			
	Kissimmee, FL 34741		
D. If amending the registered agent and/or registered office address: new registered agent and/or the new registered office address:	ess in Florida, enter the name of the		
Name of New Registered Agent			
(Florida stree	et address)		
New Registered Office Address:	, Florida		
. (City)	(Zip Code)		
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with the second s	ith and accept the obligations of the position.		
Signature of New Registered Ag	gent, 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)

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: X Change	<u>PT</u>	John Do	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	<u>enes</u>	
_X Add	<u>sv</u>	Sally Sn	nith	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
1) Change				
Add				
Remove				
2) Change				
Add				
Remove				
3) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change		_		
Add				
Remove				

	nal sheets, if necessary	v). (Be specific)	nge(s) here:		
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					-
<u>If an a</u> mendme	ent provides for an e r implementing the a	mendment if not o	ication, or cancel contained in the a	lation of issued sha mendment itself:	res.
<u>provisions for</u>	olicable, indicate N/A				
provisions for	olicable, indicate N/A				
<u>provisions for</u>	olicable, indicate N/A				
<u>provisions for</u>	olicable, indicate N/A				
<u>provisions for</u>	olicable, indicate N/A				
provisions for	olicable, indicate N/A				
<u>provisions for</u>	olicable, indicate N/A				
<u>provisions for</u>	olicable, indicate N/A				

date this document was signed. 07	701/2013	3	
Effective date <u>if applicable</u> :		nan 90 days after amendment file date)	_
Adoption of Amendment(s)	(<u>CHECK ONE</u>)		
■ The amendment(s) was/were adopt by the shareholders was/were suffi	ed by the shareholders.	The number of votes cast for the amendment(s)	
		s through voting groups. The following statement and to vote separately on the amendment(s):	
"The number of votes cast fo	r the amendment(s) was	s/were sufficient for approval	
by	(voting group)	"	
☐ The amendment(s) was/were adopt action was not required.		ctors without shareholder action and shareholder	
☐ The amendment(s) was/were adopt action was not required.	ted by the incorporators	without shareholder action and shareholder	
Dated 07/2	5/2013 Janus B	tu	
selected, appointed		• •	
		or printed name of person signing)	_

(Title of person signing)