P07000012678

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





100428908881

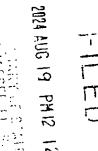
Omend

-86/20/24--01082--898 *+35.00

TATA VERSE SENTA TATE
SECRETARIOS DE LA COMPAZA DE COMP

RECEIVED

AUG 20 2024 A RAMSEY



CORPORATE ACCESS,

When you need ACCESS to the world

INC.

236 East 6th Avenue. Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

WALK IN

	PICK UP:	MISTY 8/19
	CERTIFIED COPY	
XX	К РНОТОСОРУ	
	CUS	
XX	K FILING	INC AMEND
1.	4 BEAUTY AESTHETIC INS	TITUTE, INC
0		
2.	(CORPORATE NAME AND DOCUMEN	T #)
3.	(CORPORATE NAME AND DOCUMEN	רא יוד
,	(CORTORATE NAME AND DOCUMEN	1 #/
4.	(CORPORATE NAME AND DOCUMEN	T #)
5.	WANDAMED VIVE IN DAVIDON	41 (1)
_	(CORPORATE NAME AND DOCUMEN	1 #)
6.	(CORPORATE NAME AND DOCUMEN	Τ#)
SPECIA	AL INSTRUCTIONS:	
	_ 	

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF COR	PORATION: 4 BEAUTY AEST	HETIC INSTITUTE, INC			
	UMBER: P07000012678				
The enclosed Arti	cles of Amendment and fee are su	bmitted for filing.			
Please return all c	orrespondence concerning this ma	tter to the following:			
	JOSEPH PORRELLO				
	Name of Contact Person				
	JOSEPH A. PORRELLO P.A.				
		Firm/ Company			
	7700 N. KENDALL DRIVE,	SUITE 602			
		Address	<u> </u>		
	MIAMI, FLORIDA 33156				
		City/ State and Zip Cod	e		
	ADMIN@PORRELLOLAW	.СОМ			
	E-mail address: (to be us	sed for future annual report	notification)		
For further inforn	nation concerning this matter, pleas	se call:			
JOSEPH PORRE	LLO	305 at (374-0092		
Na	ime of Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a chec	ck for the following amount made	payable to the Florida Depa	artment of State:		
S35 Filing Fe	e □\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
	Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Ameno Divisio The C 2415 i	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303		

Articles of Amendment to Articles of Incorporation

FILED

4 BEAUTY AESTHETIC INSTITUTE, INC 2024 AUG 19 PM 12 12 (Name of Corporation as currently filed with the Florida Dept. of State) P07000012678 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc." or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable; (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address:

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

. 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)

Example:

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> <u>John</u>	<u>ı Doe</u>	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
X Add	<u>SV</u> <u>Sall</u>	y Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	DPST	Constantino Mendienta	2310/2320 South Dixie Highway
Add			Coconut Grove, Florida 33133
X Remove	DRCT		2210/2220 C . d. D' ' H' b
2) Change	DPST	Camille Monasterio	2310/2320 South Dixie Highway
X Add			Coconut Grove, Florida, 33133
Remove Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Ramaya			

Docusign Envelope ID: 6D503560-A742-409,7-B5F0-509327226727

(Attach additional sheets, if necessary),	(Be specific)
	
-	
-	
· ···	
 _ _ .	
	
·	
If an amandmunt pravidas for an aych	nange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
· ·	

The date of each amendment	8-19-24	, if other than the
date this document was signed		, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
	his block does not meet the applicable statutory filing requirements, this da ne Department of State's records.	te will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/wer action was not required.	e adopted by the incorporators, or board of directors without shareholder acti-	on and shareholder
☐ The amendment(s) was/wer by the shareholders was/we	e adopted by the shareholders. The number of votes cast for the amendment(ere sufficient for approval.	s)
	e approved by the shareholders through voting groups. The following statemed for each voting group entitled to vote separately on the amendment(s):	?માં
"The number of votes	cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
Dated	DocuSigned by:	
Signature	Constantino G. Mendieta	
(B _j	y a director, president or other officer – if directors or officers have not been lected, by an incorporator – if in the hands of a receiver, trustee, or other courpointed fiduciary by that fiduciary)	t
	CONSTANTINO MENDIENTA	
	(Typed or printed name of person signing)	
	DPST	
	(Title of person signing)	