# P07000004385

(Req	uestor's Name)	
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(Add	ress)	
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Amand Jan. 1.13

#### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	D07000641	S BEAUTY S. 385	ALON, INC	
The enclosed Articles of	of Amendment and fee are su	bmitted for filing.		
Please return all corres	pondence concerning this made	tter to the following:		
	GILVAM F DO	S SANTOS		
-	GFS TAX & AC	Name of Contact Person		
	3127 COCOPL	Firm/ Company LUM CIRCLE		
COCONUT CREEK FL 33063				
GIL	E-mail address: (to be us	City/ State and Zip Cod  OM  sed for future annual report		
For further information	concerning this matter, pleas	se call:		
GILVAM F	DOS SANTOS	at (954	, 9408322	
Name o	f Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:	
S35 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)	
Mailing Address Amendment Section			Address Iment Section	

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** Articles of Incorporation of



## HELENA'S BEAUTY SALON, INC

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

P07000064385					
(Documen	nt Number of Corporation (if	known)			
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this I	Torida Profit Co	<i>rporation</i> adopts	the following a	mendment(s) to
A. If amending name, enter the new na	ame of the corporation:				
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp," "Inc," or "C	Co". A professio	or "incorporated onal corporation	d" or the abbi	the new reviation ntain the
B. Enter new principal office address,					
(Principal office address MUST BE A S	TREET ADDRESS )				
C. Enter new mailing address, if appli (Mailing address MAY BE A POST)					
D. If amending the registered agent an new registered agent and/or the new	nd/or registered office addr	ess in Florida, er	iter the name of	<u>the</u>	
Name of New Registered Agent	APARECIDA G H	_			
Nume of New Registered Agent	3400 W HILLSBORG	BLVD APT	203		
	(Florida stre	ret address)			
New Registered Office Address:	COCONUT C	REEK	, Florida 33	073	
	(City)		(2	Zip Code)	
New Registered Agent's Signature, if c	hanging Registered Agent:			_	
I hereby accept the appointment as regist	tered agent. I am familiar w	ith and accept th	e obligations of th	he position.	
Si	anature of New Registered A	刀(d) 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 Doe	
X Remove	$\underline{\mathbf{V}}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	P	APARECIDA G HOWARD	3400 W HILLSBORO BLVD
Add			COCONUT CREEK
Remove			FL 33073
2) Change	D	JOSE R DERUBEIS	4832 S STATE RD 7 S 205
Add			COCONUT CREEK
Remove			FL 33073
3) Change		_	
Add			
Remove			
4) Change	·		
Add			
Remove			
5) Change			
Add			- A - All - A - A - A - A - A - A - A -
Remove			
6) Change		_	
Add			
Remove			

E. <u>If am</u>	ending or adding additional Articles, enter change(s) here:
(Attac	h additional sheets, if necessary). (Be specific)
`	
	· · · · · · · · · · · · · · · · · · ·
	The state of the s
	4-00/19-00/19
If an	amendment provides for an exchange, reclassification, or cancellation of issued shares,
pro	visions for implementing the amendment if not contained in the amendment itself:
	(if not applicable, indicate N/A)
	( · · · · · · · · · · · · · · · · · · ·
I/A	

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:  (no more than 90 days after amendment file date)	<del></del>
Adoption of Amendment(s) ( <u>CHECK ONE</u> )	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes east for the amendment(s) was/were sufficient for approval	
by	
(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated_10/17/2013	
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 court appointed fiduciary by that fiduciary)	_
JOSE ROBERTO DERUBEIS	
(Typed or printed name of person signing)	<del></del>
DIRECTOR	
(Title of person signing)	_