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. Anthonia

COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: SEREN The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call:

Name of Contact Person

Name of Contact Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

\$35 Filing Fee

\$43.75 Filing Fee & Certificate of Status

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Mailing Address

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

Street Address

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

Articles of Amendment to Articles of Incorporation of SERENITY NAIL & SPASALON INTEGRAL (Name of Corporation as currently filed with the Florida Dept. of State) PO7800125737 (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:

SERENITY NA	165	INC		he new
name must be distinguishable and contain the washbreviation "Corp.," "Inc.," or Co.," or the designame must contain the word "chartered," "profession	gnation "Col	rp," "Inc," or "Co	". A professional corp	or the oration
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET AD		N/	A	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	<u>OX</u>) _	Nf	A	
	<u>-</u>			
D. If amending the registered agent and/or registenew registered agent and/or the new registered			enter the name of the	
Name of New Registered Agent:		NA		
New Registered Office Address:	(Florid	a street address)	***************************************	
warded from the			, Florida	
	(City)		(Zip Code)	
New Registered Agent's Signature, if changing Re				
I hereby accept the appointment as registered agent.	I am famili	ar with and accept	the obligations of the po	sition.
		NIA		
Signat	ure of New I	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
	D/A		☐ Add☐ Remove
	N/A		☐ Add ☐ Remove
	MIA		☐ Add☐ Remove
E. If amer (attach d	nding or adding additional Articles, additional sheets, if necessary). (Be	specific)	
<u>provis</u>	mendment provides for an exchang ions for implementing the amendme not applicable, indicate N/A)	e, reclassification, or cancellent if not contained in the am	ation of issued shares, nendment itself;
	<i>1</i> 4	/A-	

The date of each amendment(s) add	ption: Jep 20 2009
Effective date if applicable:	(date of adoption is required) Se in 20 2009
	ore than 90 days after amendment file date)
	, ,
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were adop by the shareholders was/were suff	oted by the shareholders. The number of votes cast for the amendment(s) ricient for approval.
	oved by the shareholders through voting groups. The following statemer ach voting group entitled to vote separately on the amendment(s):
"The number of votes cast for	r the amendment(s) was/were sufficient for approval
by);
(voting	g group)
The amendment(s) was/were adopt action was not required.	sted by the board of directors 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 Sep	18/2009
Signature	Mdy /
(B y a direc selected by	itor, president or other officer — If directors or officers have not been y an incorporator — if in the hands of a receiver, trustee, or other court
appointed	fiduciary by that fiduciary)
	O
(<	CHANH N. LENGUYEN
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)