## P08000002236

| (Re                                     | equestor's Name)   |             |  |  |
|---|--------------------|-------------|--|--|
| (Ac                                     | ldress)            |             |  |  |
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| (Ci                                     | ty/State/Zip/Phon  | e #)        |  |  |
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## **COVER LETTER**

**TO:** Amendment Section

**Division of Corporations** 

| NAME OF COPPOR           | ATION: Miracle 7, Inc.                                   |  |  |  |  |
|--------------------------|--|--|--|--|--|
| DOCUMENT NUMB            | P08000002226   |  |  |  |  |
| The enclosed Articles of | of Amendment and fee are su                              | bmitted for filing.  |  |  |  |
| Please return all corres | pondence concerning this ma                              | tter to the following:   |  |  |  |
|                          | Michael J. Sacks, Esq.                                   |  |  |  |  |
| _                        |  | Name of Contact Person   | 1  |  |  |
|                          | Brush & Sacks  |  |  |  |  |
| -                        |  | Firm/ Company  | · · · · · · · · · · · · · · · · · · ·  |  |  |
|                          | 7210 Wisteria Ave.                                       |  |  |  |  |
| •                        | Address  |  |  |  |  |
|                          | Parkland, FL 33076                                       |  |  |  |  |
| -                        |  | City/ State and Zip Code   | •  |  |  |
|                          | - (C):4 101-:  |  |  |  |  |
| caroly                   | n@itsa10haircare.com                                     | 100  |  |  |  |
|                          | E-mail address: (to be us                                | sed for future annual report                                       | notification)  |  |  |
| For further information  | concerning this matter, pleas                            | se call:   |  |  |  |
| Michael J. Sacks         |  | 954<br>at (  | 445-2527   |  |  |
| Name o                   | f Contact Person   | Area Coo   | le & Daytime Telephone Number  |  |  |
| Enclosed is a check for  | the following amount made                                | payable to the Florida Depa  | rtment of State:   |  |  |
| ■ \$35 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) |  |  |
| Amer<br>Divis<br>P.O.    | ing Address indment Section ion of Corporations Box 6327 | Amend<br>Divisio<br>Clifton  | Address . ment Section n of Corporations Building                                      |  |  |

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

| (Name of Corporation a   | as currently filed with the Florida Dept. of Sta   | te)                      |
|--|--|--------------------------|
| Miracle 7, Inc. 40800000000000000000000000000000000000   |  |                          |
| (Document  | Number of Corporation (if known)                   |                          |
| Pursuant to the provisions of section 607.1006, Florida Statis Articles of Incorporation:  | atutes, this Florida Profit Corporation adopts the | e following amendment(s) |
| A. If amending name, enter the new name of the corpo   | ration:  |                          |
| N/A  |  | The new                  |
| name must be distinguishable and contain the word "c" ("Corp.," "Inc.," or Co.," or the designation "Corp," "word "chartered," "professional association," or the abbi | Inc," or "Co". A professional corporation na       |                          |
| B. Enter new principal office address, if applicable:  | 2800 Gateway Drive Suite #103                      | rus_                     |
| (Principal office address <u>MUST BE A STREET ADDRE</u>  | Pompano Beach, FL 33069                            | - <del> </del>           |
|  |  | 257 20 7                 |
|  |  | A CONTRACTOR             |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  | 2800 Gateway Drive Suite #103                      |                          |
|  | Pompano Beach, FL 33069                            | <u> </u>                 |
|  | <del></del>  |                          |
| D. If amending the registered agent and/or registered of   | office address in Florida, enter the name of th    | e                        |
| new registered agent and/or the new registered office  |  | -                        |
| Name of New Registered Agent N/A   |  |                          |
|  |  |                          |
|  | (Florida street address)                           |                          |
| New Registered Office Address:   | Florid   | В                        |
|  | (City)   | (Zip Code)               |
|  |  |                          |
| New Registered Agent's Signature, if changing Register   | red Agent:   |                          |
| I hereby accept the appointment as registered agent. I am  |  | position.                |
|  |  |                          |
|  |  |                          |
| Signatur   | e of New 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)

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>nes</u>  |   |         |
| X Add                         | <u>sv</u>    | Sally Sr | <u>nith</u> |   |         |
| Type of Action<br>(Check One) | <u>Title</u> |          | Name        |   | Address |
| 1) N/A Change                 |              |          |             | _ |         |
| Add                           |              |          |             |   |         |
| Remove                        |              |          |             |   |         |
| 2) Change                     |              | _        |             | _ |         |
| Add                           |              |          |             |   |         |
| Remove                        |              |          |             |   |         |
| 3) Change                     |              | _        |             | - |         |
| Add                           |              |          |             |   |         |
| Remove                        |              |          |             |   |         |
| 4) Change                     |              | _        |             | - |         |
| Add                           |              |          |             |   |         |
| Remove                        |              |          |             |   |         |
| 5) Change                     |              |          |             | _ |         |
| Add                           |              |          |             |   |         |
| Remove                        |              |          |             |   |         |
| 6) Changa                     |              |          |             |   |         |
| 6) Change                     |              | _        |             | _ |         |
| Add                           |              |          |             |   |         |
| Remove                        |              |          |             |   |         |

| Attach additional sheets, if necessary).   | (Be specific)  |
|--|--|
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| provisions for implementing the ame<br>(if not applicable, indicate N/A)   | nange, reclassification, or cancellation of issued shares, and and an analysis |
| provisions for implementing the ame<br>(if not applicable, indicate N/A)   | nange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:  |
| provisions for implementing the ame<br>(if not applicable, indicate N/A)   | ndment if not contained in the amendment itself:   |
| provisions for implementing the ame<br>(if not applicable, indicate N/A)   | nange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:  |
| provisions for implementing the ame<br>(if not applicable, indicate N/A)   | ndment if not contained in the amendment itself:   |
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| provisions for implementing the ame (if not applicable, indicate N/A)  | ndment if not contained in the amendment itself:   |
| provisions for implementing the ame  | ndment if not contained in the amendment itself:   |

| The date of each amendment(s) adoption:   |   | , if other than th           |
|---|---|------------------------------|
| date this document was signed.  |   |                              |
| Effective date if applicable:   | (no more than 90 days after amendment file date)  | <del></del>                  |
|   | (no more than 90 days after amenament fite date)  |                              |
| Note: If the date inserted in this block does document's effective date on the Department | s not meet the applicable statutory filing requirements, this d of State's records.   | ate will not be listed as th |
| Adoption of Amendment(s)  | CHECK ONE)  |                              |
| ☐ The amendment(s) was/were adopted by the by the shareholders was/were sufficient for    | the shareholders. The number of votes east for the amendment<br>or approval.  | (s)                          |
|   | the shareholders through voting groups. The following stateming group entitled to vote separately on the amendment(s):                  | ient                         |
|   | nendment(s) was/were sufficient for approval  |                              |
| by  | ······································  |                              |
| 6   | voting group)   |                              |
| The amendment(s) was/were adopted by the action was not required.                         | ne board of directors without shareholder action and sharehold  | ler                          |
| ☐ The amendment(s) was/were adopted by the action was not required.                       | ne incorporators without shareholder action and shareholder   |                              |
| Dated3[14][   |   |                              |
| Signature   |   |                              |
|   | esident or other officer - if directors or officers have not been<br>acorporator - if in the hands of a receiver, trustee, or other cou |                              |
|   | ry by that fiduciary)   | п                            |
|   | (Typed or printed name of person signing)   |                              |
|   | (Typed or printed name of person signing)   |                              |
|   | CEO   |                              |
|   | (Title of person signing)   |                              |