PD8000010268

(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:





100311744351

04/19/19--01017--010 **35.00



Anund

APR 2 5 2018
I ALBRITTON

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORA	ATION: THE GREAT AME	ERICAN BARBER SHOP I	I, INC.
DOCUMENT NUMBI	ER:		
	f Amendment and fee are su	bmitted for filing.	
Please return all corresp	ondence concerning this mat	ter to the following:	
I	DAVID HART		
-		Name of Contact Person	
_		Firm/ Company	
1	3046 RACETRACK RD 19	5	
_		Address	
٦	ГАМРА FL 33626		
_	·	City/ State and Zip Code	2
	E-mail address: (to be us	sed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
DAVID HART		813	966-6157 de & Daytime Telephone Number
Name of Contact Person		Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	irtment 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)
Ame Divis P.O.	ing Address ndment Section sion of Corporations Box 6327 thassee, FL 32314	Amend Division Clifton	Address Iment Section on of Corporations Building Executive Center Circle

Tallahassee, FL 32301



April 17, 2018

DAVID HART 13046 RACETRACK RD 195 TAMPA, FL 33626

SUBJECT: THE GREAT AMERICAN BARBER SHOP II, INC.

Ref. Number: P08000010268

We have received your document for THE GREAT AMERICAN BARBER SHOP II, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must have original signatures.

You failed to sign the form.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton Regulatory Specialist II

Letter Number: 018A00007736

www.sunbiz.org

DO DOV cook milli

Articles of Amendment to Articles of Incorporation of

to

THE GREAT AMERICAN BARBER SHOP II, INC.

(Name of Corporation as currently f	iled with the Florida Dept. of State)	•
P08000010268		
(Document Number of C	orporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida</i> Articles of Incorporation:	orida Profit Corporation adopts the following	ng amendment
A. If amending name, enter the new name of the corporation:		
		The new
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 "P.	o". A professional corporation name must	
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)		201
(Manual marks) (MAT DE ATOST OTTTOL MON)	¥	
	· · · · · · · · · · · · · · · · · · ·	100
	· ·	- G 1
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:	s in Florida, enter the name of the	平
	*	7.0
Name of New Registered Agent	<u> </u>	
(Florida street	address)	_
	*	
		Code)
New Registered Office Address:	, Florida	Code)
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent. I am familiar with	h and accept the obligations of the position	
Signature of New Res	istered 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 Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>\$V</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	VP	DONALD HART	13046 RACETRACK RD 196
Add			TAMPA FL 33626
X Remove			
2) Change	VP	SARAH HART	13046 RACETRACK RD 195
, Add			TAMPA FL 33626
X Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

f amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)			
				· -
				<u>,</u> .
				··
				
		=.==		
If an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	ange, reclassification, ndment if not containe	or cancellation of is d in the amendment	sued shares, itself:	
				_
				· · · ·

The date of each amendment(s) addate this document was signed.	APRIL 1, 2018 doption:	, if other that
date this document was signed.		
Effective date if applicable:	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bedocument's effective date on the De	block does not meet the applicable statutory filing requirements, this department of State's records.	ate will not be listed
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment afficient for approval.	(s)
☐ The amendment(s) was/were app must be separately provided for	proved by the shareholders through voting groups. The following staten each voting group entitled to vote separately on the amendment(s):	<i>ient</i>
	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	opted by the board of directors without shareholder action and sharehold	iler
action was not required. APRIL 12 Dated Signature		
selecte	director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other conted fiduciary by that fiduciary)	
	DAVID HART	
	(Typed or printed name of person signing)	