

PO8000011504

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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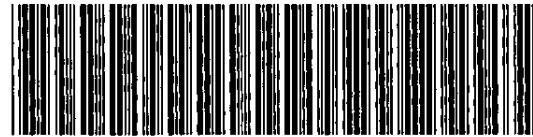
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

10/10/12--01013--007

**43.75

10/12/12 RW
And

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Beautiful Nails & Spa Boutique, LLC.

DOCUMENT NUMBER: P08000011504

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Maria F. Da Silva
Name of Contact Person

Beautiful Nails & Spa Boutique, LLC.
Firm/ Company

50 Leanni Way D-5
Address

PALM COAST FL 32137
City/ State and Zip Code

Mdasilva@fbpd.org
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MARIA F. Da Silva at (908) 764-2238
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:

- | | | | |
|--|---|---|--|
| <input type="checkbox"/> \$35 Filing Fee | <input checked="" type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$52.50 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

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

Articles of Amendment
to
Articles of Incorporation
of

Beautifull Nails & Spa Boutique INC.
(Name of Corporation as currently filed with the Florida Dept. of State)

PO 8000011504

(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:

The new 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."

Beautifull Nails & Spa Boutique INC.

B. Enter new principal office address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

50 Leanni WAY D-5

PALM Coast FL 32137

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

Beautifull Nails & Spa Boutique INC

PO Box 351316

PALM Coast FL 32135

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

MARIA F. DaSilva

50 Leanni WAY D-5

(Florida street address)

New Registered Office Address:

PALM Coast

FL

Florida

32137

(City)

(Zip Code)

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.

Maria F. Da Silva

Signature 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:

☒ Change PT John Doe

☒ Remove V Mike Jones

☒ Add SV Sally Smith

Type of Action
(Check One)

Title

Name

Address

1) ☐ Change

P

Cindy Costa

Cindy Costa
P.O. Box 351181
PALM COAST FL 32135

☐ Add

☒ Remove

2) ☐ Change

P

MARIA F. Da Silva

MARIA F. Da Silva
P.O. Box 351316
PALM COAST FL

☒ Add

☐ Remove

3) ☐ Change

P

Natalia Ferreira

Natalia Ferreira
P.O. Box 351316
PALM COAST FL 32135

☒ Add

☐ Remove

4) ☐ Change

VP

JOHN Costa

50 Leanni Way D-5
PALM COAST FL 32137

☐ Add

☒ Remove

5) ☐ Change

VD

JOHN Costa Jr

18 Claymont Court W
PALM COAST FL 32137

☐ Add

☒ Remove

6) ☐ Change

D

JOHN Costa Sr

18 Claymont Court W
PALM COAST FL 32137
50 Leanni Way D-5
PALM COAST FL 32137

☐ Add

☒ Remove

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:

☒ Change PT John Doe

☐ Remove V Mike Jones

☒ Add SV Sally Smith

Type of Action
(Check One)

Title

Name

Address

1) ☐ Change VP Moises M. Da Silva 351316
☒ Add PALM COAST FL 32135
☐ Remove

2) ☐ Change VP Antonio Ferreira 351316
☒ Add PALM COAST FL 32135
☐ Remove

3) ☐ Change _____ _____ _____
☐ Add _____
☐ Remove

4) ☐ Change _____ _____ _____
☐ Add _____
☐ Remove

5) ☐ Change _____ _____ _____
☐ Add _____
☐ Remove

6) ☐ Change _____ _____ _____
☐ Add _____
☐ Remove

E. If amending or adding additional Articles, enter change(s) here:

(Attach additional sheets, if necessary). (Be specific)

Article V Name of Florida street of Registered Agent
Maria F. Da Silva PO Box 351316 PALM Coast FL 32135

Article VI MARIA F. Da SILVA PO Box 35.1316
PALM Coast FL 32135

Articles VII Title P MARIA F. Da Silva
PO Box 351316 PALM Coast FL 32135

Articles VII Title P Natalia Ferreira

Articles VII Title VP Moises M. Da Silva
PO Box 351316 PALM Coast FL 32135

Articles VII ANTONIO Ferreira
title VP

Address PO Box 351316

PALM Coast FL 32135

**F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,
provisions for implementing the amendment if not contained in the amendment itself:**

(if not applicable, indicate N/A)

The date of each amendment(s) adoption: 10/5/12

Effective date if applicable: 10/5/12
(no more than 90 days after amendment file date)

Adoption of Amendment(s) (CHECK ONE)

- ☐ 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 cast 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 10/5/12

Signature Maria F. Da Silva
(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)

Maria F. Da Silva
(Typed or printed name of person signing)

President
(Title of person signing)