

P08000055823

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(Business Entity Name)

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2010 APR 12 A 8:27
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Amend RX
Theris
4-14-10

COVER LETTER

Process First

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: IDENTITY HAIR & NAILS, INC.

DOCUMENT NUMBER: P08000055823

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

Please return all correspondence concerning this matter to the following:

ANTONIA GENTRY

Name of Contact Person

GREEN AND GENTRY, CPAS, LLC

Firm/ Company

751 SE PORT ST LUCIE BLVD

Address

PORT ST LUCIE, FL 34984

City/ State and Zip Code

TGENTRY@GANDGCPAS.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ANTONIA GENTRY

Name of Contact Person

at (772)

879-9770

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

☐ \$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
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

FILED

IDENTITY HAIR & NAIL, INC.

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

P08000055823

(Document Number of Corporation (if known))

2010 APR 12 A 8:27

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

IDENTITY HAIR AND NAILS, INC.

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."

B. Enter new principal office address, if applicable:

(Principal office address **MUST BE A STREET ADDRESS**)

10360 SW VILLAGE CENTER DR

PORT ST LUCIE, FL 34987

C. Enter new mailing address, if applicable:

(Mailing address **MAY BE A POST OFFICE BOX**)

10360 SW VILLAGE CENTER DR

PORT ST LUCIE, FL 34987

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:

DENISE GARDNER

New Registered Office Address:

955 SW GRAND RESERVE BLVD

(Florida street address)

PORT ST LUCIE

(City)

Florida 34986

(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.

Denise Gardner
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)

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

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

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

The business has changed the name from "Nail" to "Nails" and has changed the Tax ID Number.

Old Tax ID number is 27-1522327 (Identity Hair & Nail, Inc.)

New Tax ID Number is 26-2815294 (Identity Hair & Nails, Inc.)

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: December 31, 2010

Effective date if applicable: December 31, 2010
(date of adoption is required)
(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

4-8-10

Signature

Denise Gardner

(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)

Denise Gardner

(Typed or printed name of person signing)

President

(Title of person signing)