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COVER LETTER

TO: Amendment Section

Tallahassee, FL 32314

Division of Corporations MERCEDES Hair STUDIO INC NAME OF CORPORATION: 10900000 2474 DOCUMENT NUMBER: __ The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Firm/ Company Trail For further information concerning this matter, please call: Menuepes Soy av at (239) 254-1004

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 & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Mailing Address Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment

to
Articles of Incorporation
of ~

Mercen	oes i	tain Sta	WOID IN	10	
(Name of Corpor	ation as curren	tly filed with the Flo	rida Dept. of State)		
(Doc	20900 cument Number	OO 241 of Corporation (if kno	7 <i>Y</i>		
Pursuant to the provisions of section 607.1006, Flor its Articles of Incorporation:	rida Statutes, this	s Florida Profit Corp	oration adopts the follo	owing amendn	nent(s) to
A. If amending name, enter the new name of the	corporation:				
				The ne	
name must be distinguishable and contain the word "Inc.," or Co.," or the designation "Corp," "In "chartered," "professional association," or the abl	ic," or "Co".	A professional corp.	porated" or the abbrev oration name must co	iation "Corp ntain the wor	." rd
B. Enter new principal office address, if applical (Principal office address MUST BE A STREET A.)		· · · · · · · · · · · · · · · · · · ·			
			-	- -	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE I	<u>BOX</u>)				
D. If amending the registered agent and/or regis			er the name of the		
new registered agent and/or the new registere	ed office addres	<u>s:</u> -			
Name of New Registered Agent					
		- 		<u> </u>	
	(Florida st	reet address)			
New Registered Office Address:		(City)	Florida	Zip Code)	1 1
			(2) (1) (1)	10 th H	
New Registered Agent's Signature, if changing R I hereby accept the appointment as registered agent.	<u>egistered Agent</u> . I am familiar	t: with and accept the o	t bligations of the position	: C1	
Sig	gnature of New k	Registered Agent, if ch	anging		
Charle Garage and					

Check if applicable \Box The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e). F.S.

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	<u>Doe</u>	
X Remove	<u>V</u> <u>Mike</u>	e Jones	
X Add	<u>SV</u> <u>Sally</u>	y Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change	YP	Thoma Soy, au	1547 Windamere
$\stackrel{\textstyle \times}{}$ Add			
Remove			Naples, FL 3×119
2) Change			<u> </u>
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change	·		
Add			
Remove			
6) Change			
Add			
Remove			

f 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 NA)	Attach additional sh	ing additional Articleets, if necessary).	(Be specific)				
provisions for implementing the amendment if not contained in the amendment itself:							
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(y not applicable, maicale N/A)	provisions for impl	ementing the amend	ment if not cont	tained in the am	endment itself:		
	(у посаррасан	e, indicate (VA)					
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The date of each amendment(s) ado	otion:, if other tha	n the
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 blo- document's effective date on the Depa	k does not meet the applicable statutory filing requirements, this date will not be listed artment of State's records.	is the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were adopt action was not required.	ed by the incorporators, or board of directors without shareholder action and shareholder	
The amendment(s) was/were adopt by the shareholders was/were suff	ed by the shareholders. The number of votes cast for the amendment(s) cient for approval.	
	ved by the shareholders through voting groups. The following statement ch voting group entitled to vote separately on the amendment(s):	
"The number of votes cast fo	the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
Dated 6/16	1)202 Venedes	
(By a dire selected.	stor, president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other court fiduciary by that fiduciary)	
_	Mercedes Soviana (Typed or printed name of person signing)	
_	President	
	(Title of person signing)	