

PO9000037507

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

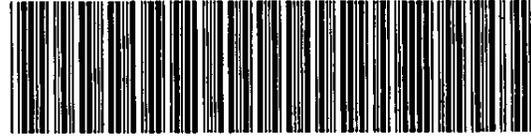
(Business Entity Name)

(Document Number)

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2016 MAR 28 PM 3:18  
DEPARTMENT OF STATE  
CORPORATION DIVISION

4/4/17

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**NAME OF CORPORATION:** Just For Extensions, Inc.

**DOCUMENT NUMBER:** P09000037507

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

Please return all correspondence concerning this matter to the following:

Michael J. Sacks, Esq.  
Name of Contact Person  
Brush & Sacks  
Firm/ Company  
7210 Wisteria Ave.  
Address  
Parkland, FL 33076  
City/ State and Zip Code

carolyn@itsa10haircare.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Michael J. Sacks at ( 954 ) 445-2527  
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 & 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



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

| <u>Type of Action</u><br>(Check One)   | <u>Title</u> | <u>Name</u> | <u>Address</u> |
|--|--------------|-------------|----------------|
| 1) <input type="checkbox"/> N/A Change | _____        | _____       | _____          |
| <input type="checkbox"/> Add           | _____        | _____       | _____          |
| <input type="checkbox"/> Remove        | _____        | _____       | _____          |
| 2) <input type="checkbox"/> Change     | _____        | _____       | _____          |
| <input type="checkbox"/> Add           | _____        | _____       | _____          |
| <input type="checkbox"/> Remove        | _____        | _____       | _____          |
| 3) <input type="checkbox"/> Change     | _____        | _____       | _____          |
| <input type="checkbox"/> Add           | _____        | _____       | _____          |
| <input type="checkbox"/> Remove        | _____        | _____       | _____          |
| 4) <input type="checkbox"/> Change     | _____        | _____       | _____          |
| <input type="checkbox"/> Add           | _____        | _____       | _____          |
| <input type="checkbox"/> Remove        | _____        | _____       | _____          |
| 5) <input type="checkbox"/> Change     | _____        | _____       | _____          |
| <input type="checkbox"/> Add           | _____        | _____       | _____          |
| <input type="checkbox"/> Remove        | _____        | _____       | _____          |
| 6) <input type="checkbox"/> Change     | _____        | _____       | _____          |
| <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)*

N/A

**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)*

N/A

The date of each amendment(s) adoption: \_\_\_\_\_, if other than 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 block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s) **(CHECK ONE)**

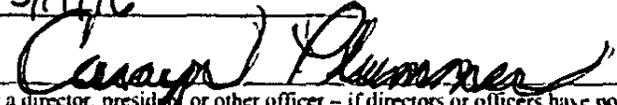
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.

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 3/14/16  
Signature   
(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)

CAROLYN PLUMMER  
(Typed or printed name of person signing)  
CEO  
(Title of person signing)