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(((H09000168299 3)))



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To:

Division of Corporations

Fax Number

: (850)617-6380

From

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number: 072450003255

Phone

: (305)634-3694

Fax Number

: (305)633-9696

COR AMND/RESTATE/CORRECT OR O/D RESIGN

ARTECH 249 BEAUTY CORP.

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Corporate Filing Menu

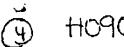
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EMPIRE CORP KIT

5002/22/40



PPE801000POH

Articles of Amendment

Articles of Incorporation

Artech 2	49 Beauty Corp.							
(Name of Corporation as currently filed with the Florids Dept. of State) P09000 0 62007 (Document Number of Corporation (if known)								
					Pursuant to the provisions of section 607.100 amendment(s) to its Articles of Incorporation:	6, Florida Statutes, this	Fl. vida Profit Corporation t	dopts the following
					A. If amending name, enter the new name of	f the corporation:		
		14	The new					
name must be distinguishable and contain abbreviation "Corp.," "Inc.," or Co.," or the name must contain the word "chartered," "pro	designation "Corp," "I	no or 'Co". A professiona	ated" or the il corporation					
B. Enter new principal office address, if app	licable:							
(Principal office address MUST BE A STREE		——————————————————————————————————————	-					
		<u> </u>	TS O					
		_	E = 71					
C. Enter new mailing address, if applicable;			超二二					
D. If amending the registered agent and/or registered office address it. Florida, enter the name of the P. 2.								
			Mo 3					
			Tro F					
D. If amending the registered agent and/or r new registered agent and/or the new regis	egistered office address	i Florida, enter the name o	tthe REFE					
Name of New Registered Agent:								
New Registered Office Address:	(Florida street	(adress)						
,	•	·						
-	(City)	, Florida (Zip Code)						
New Registered Agent's Signature, if changin	-	1-2						
I hereby accept the appointment as registered as	gent. I am familiar wish	end accept the obligations of	the position.					
St	gnuture of New Register	e ! Agens, if changing						

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If amending the Officers and/or Directors, enter the title and name of such 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>	Name	Address	Type of Action
D/P	Juan Pablo Carranza	1500 San Remo / venue Suite 248 Coral Gables, Fl. 3146	☑ Add ☐ Remove
		10 7	☐ Add ☐ Remove
			Add Remove
E. If amending (attach additi	gor udding additional Articles, enter clional sheets, if necessary). (Be specific	hange(s) here:	
F. If an amen	dment provides for an exchange, recla	ssification, or cas callation of is	wed shares.
	for implementing the amendment if no pplicable, indicase N/A)	t contained in the smeadment	itself:

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غب

w10000POH _	8399	
	t(s) adoption: July 23, 2008 (date of adoption is requ	(ed)
Effective date if applicable:	(no more than 90 days ofter amendment file	state)
		·
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/we by the shareholders was/we	re adopted by the shareholders. The number ere sufficient for approval.	of votes cast for the amendment(s)
	re approved by the shareholders through vot d for each voting group entitled to vote sepa-	
"The number of votes	cast for the amendment(s) was/were sufficie	of for approval
by	(voting group)	
	(voting group)	
The amendment(s) was/we action was not required.	re adopted by the board of directors without a	narcholder action and shareholder
The amendment(s) was/we action was not required.	re adopted by the incorporators without share	holder action and shareholder
Dared	7/23/09	
Signature		
(Ву	a director, president or other afficer if directed, by an incorporator - if in the hands of it	ctors of officers have not been
SDD:	ored, by an incorporator — if in the hands of it	receiver, dustee, or other court
***		Pablo Bured
	(Typed or printed name of per it	n signing)
	Incorpora	ut N
	(Title of person signing)	

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