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Division of Corporations Public Access System

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JOSEMMA BEAUTY SALON CORP.

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8/21/2009 10:54:23 AM PAGE 1/001

Fax Server



August 21, 2009

FLORIDA DEPARTMENT OF STATE Division of Corporations

JOSEMMA BEAUTY SALON CORP. 5950 NE 191 TERRACE MIAMI, FL 33015

SUBJECT: JOSEMMA BEAUTY SALON CORP.

REF: P09000068692

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

This document was previously filed on August 18, 2009.

If you have any questions concerning the filing of your document, please call (850) 245-6892.

Tina Roberts Regulatory Specialist II FAX Aud. #: H09000185704 Letter Number: 709A00028348

COVER LETTER

TO: Amendment Section
Division of Corporations

| NAME OF CORP | ORATION:J | OSEMMA BEAUTY SALON | I CORP. | |
|---|--|--|--|--|
| DOCUMENT NU | MBER: | P09000068692 | · · · · · · · · · · · · · · · · · · · | |
| The enclosed Articl | es of Amendment and for | e are submitted for filing. | | |
| Please return all cor | respondence concerning | this matter to the following: | | |
| | Al | FONSO GUTIERREZ | | |
| | | Name of Contact Person | • | |
| | JOSEM | MA BEAUTY SALON CORP. | | |
| | | Firm/ Company | | |
| 5950 NE 191 TERRACE | | | | |
| | | Address | _ | |
| | | MINER COME | | |
| - | | MIAMI, FL. 33015 City/ State and Zip Code | | |
| | | _ARDE@LIVE.COM used for future annual report notification) | | |
| For further informat | ion concerning this matte | er, please call: | | |
| ALFO | NSO GUTIERREZ | at (786) 3 | 82-5831 | |
| Name o | f Contact Person | Arca Code & Daytime Tel | ephone Number | |
| Enclosed is a check | for the following amount | made payable to the Florida Depar | tment of State: | |
| | \$43.75 Filing Pee & 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 Ad Amendment Division of P.O. Box 63 Tallahassee, | Section Corporations 27 | Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circl Tallahassee, FL 32301 | c | |

Articles of Amendment to

SECRETARY OF STATE DIVISION OF CORPORATIONS

Articles of Incorporation of

09 AUG 21 PM 2: 47

| JOSEMMA BEAUTY SALO | ON CORP. |
|--|---|
| (Name of Corporation as currently filed with | the Florida Dept. of State) |
| P09000068692 | |
| (Document Number of Corporat | tion (if known) |
| Pursuant to the provisions of section 607.1006, Florida Status amendment(s) to its Articles of Incorporation: | tes, this Florida Profit Corporation adopts the follow |
| A. If amending name, enter the new name of the corporation | on: |
| | : The new |
| name must be distinguishable and contain the word "corpabbreviation "Corp.," "Inc.," or Co.," or the designation "Coname must contain the word "chartered," "professional associates." | Corp, " "Inc," or "Co". A professional corporation |
| B. Enter new principal office address, if applicable: | 5950 NW 191 TERR |
| (Principal office address <u>MUST BE A STREET ADDRESS</u>) | MIAMI, FL. 33015 |
| | |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | 5950 NW 191 TERR |
| · | MIAMI, FL. 33015 |
| D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ad | e address in Florida, enter the name of the ldress: |
| Name of New Registered Agent: | |
| New Registered Office Address: (Flor | rida street address) |
| | , Florida |
| (Ĉity, | (Zip Code) |
| New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fam | niliar with and accept the onligations of the position. |
| Signature of Nev | w Registered Agent, if changing |

₫006/008

| removed a | ng the Officers and/or Directors, ente and title, name, and address of each (ditional sheets, if necessary) | er the title and name of each Officer and/or Director being | officer/director being g added; |
|--------------------------------|--|---|---|
| (MITTEL) MOR | amonal sneets, if necessary) | | |
| Title | <u>Name</u> | Address | Type of Action |
| | | | |
| | | | |
| | * | | |
| E. <u>If amen</u> (attach a | ding or adding additional Articles, endditional sheets, if necessary). (Be s | nter change(s) here: pecific) | |
| | | | |
| | | | |
| | • | | |
| <u>provisi</u> | mendment provides for an exchange, ons for implementing the amendmen not applicable, indicate N/A) | reclassification, or cancellat t if not contained in the ame | tion of issued shares, endment itself; |
| | , | | |
| | | | |
| | **** | | |
| | | | |

| The date of each amendmen | t(s) adoption; 08-20-2009 | |
|--|--|-------|
| Effective date if applicable: | 08-20-2009 (date of adoption is required) | - |
| и вроцение. | (no more than 90 days after amendment file date) | • |
| Adoption of Amendment(s) | (CHECK ONE) | |
| | ere adopted by the shareholders. The number of votes cast for the amendment cre sufficient for approval. | nt(s) |
| | erc approved by the shareholders through voting groups. The following state and for each voting group entitled to vote separately on the amendment(s): | ment |
| "The number of votes | cast for the amendment(s) was/were sufficient for approval | |
| by | (voting group) | |
| | (voting group) | |
| The amendment(s) was/we action was not required. | ere adopted by the board of directors without shareholder action and shareho | lder |
| action was not required. | ere adopted by the incorporators without shareholder action and shareholder | |
| Dated_08-2 Signature | // N | |
| (B) | v a director, president or other officer – if directors or officers have not been ected, by an incorporator – if in the hands of a receiver, trustee, or other coupointed fiduciary by that fiduciary) | |
| | ALFONSO GUTIERREZ | |
| | (Typed or printed name of person signing) | |
| | VICE PRESIDENT | |
| | (Title of person signing) | |