## Florida Department of State Division of Corporations

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(((H13000242046 3)))



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From:

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Account Number : I20050000147

: (305)649-7128

Fax Number

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\*\*Enter the email address for this business entity to be used for incure annual report mailings. Enter only one email address please.\*

COR AMND/RESTATE/CORRECT OR O/D RESIGN RED CARPET SALON-SPA & SUPPLY-BOUTIQUE, INC.

| Certificate of Status | 0       |
|-----------------------|---------|
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## COVER LETTER

| TO: Amendment Sect<br>Division of Corp  |  |   |  |  |
|---|--|---|--|--|
| NAME OF CORPOR  | RATION: RED CARPET                           | SALON-SPA & SUF   | PLY-BOUTIQUE, INC.   |  |
| DOCUMENT NUM  | BAAAAAAAAA                                   | ···   |  |  |
| The enclosed Articles   | of Amendment and fee are st                  | ibmitted for filing.  |  |  |
| Please return all corres  | spondence concerning this ma                 | atter to the following:   |  |  |
|   | LISSY QUINTAN                                | <b>IA</b>   |  |  |
|   |  | Name of Contact Perso   | n  |  |
|   | RED CARPET SAI                               | LON-SPA & SUPF  | PLY-BOUTIQUE, INC.   |  |
|   |  | Firm/ Company   |  |  |
|   | 13992 SW 8TH S                               | ST  |  |  |
|   |  | Address   |  |  |
|   | MIAMI, FL 33184                              | ļ   |  |  |
|   | -1   | City/ State and Zip Cod   | <u> </u>   |  |
| tarle   | orelixabeth@gma                              | il.com  |  |  |
| E-mail address: (to be used for future annual report notification)                            |  |   |  |  |
|   |  |   |  |  |
| For further information   | concerning this matter, pleas                | se call:  |  |  |
| Lissy Quintar   | na   | _ at (305   | 649-7128   |  |
| Name (  | f Contact Person                             | Ares Co   | de & Daytime Telephone Number  |  |
| Enclosed is a check for the following amount made payable to the Florida Department of State: |  |   |  |  |
| ■ \$35 Filing Feu   | □\$43.75 Filling Fee & Certificate of Status | □\$43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is<br>enclosed) | □\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) |  |
|   | ing Address                                  |   | Address  |  |
| Amendment Section Division of Corporations  |  | Amendment Section Division of Corporations                                  |  |  |
| P.O. Box 6327   |  | Clifton Building  |  |  |

Tallahassee, F1, 32314

2661 Executive Center Circle Tallahassee, Fl., 32301

(H130002429463))

Articles of Amendment to Articles of Incorporation 2818 OCT 31 PM 5: 03

RED CARPET SALON-SPA & SUPPLY-BOUTIQUE, INC.

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

P09000099283

(Document Number of Corporation (if known)

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:

N/A

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". If 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)

C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

N/A

D. If umending 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

QUINTANA LISSY

13992 SW 8TH ST

(Florida street address)

New Registered Office Address:

MIAMI

..... 3318

(Chy)

(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment astropistered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

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If amending the Officers and/or Directors, enter the title and name of each diffeer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach odditional sheets, if necessary)

Please note the officer director title by the first letter of the office title:

P = President;  $\hat{V} \cap Vice President$ ;  $\hat{T} = Treasurer$ ;  $S \cap Secretary$ ; D = Director;  $TR \in Trustee$ ;  $\hat{C} \cap Chairman or Clerk$ ;  $CEO \cap Chief$ 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 Remaye, and Sally Smith, SV as an Add.

| Example: X Change             | <u>PT Jol</u>        | m Doe              |                 |  |  |
|-------------------------------|----------------------|--------------------|-----------------|--|--|
| X Remove                      | <u> </u>             | Mike Jones         |                 |  |  |
| X Vqq                         | <u>SV</u> <u>Sal</u> | lly Smith          |                 |  |  |
| Type of Action<br>(Check One) | <u> Title</u>        | <u>Name</u>        | Address         |  |  |
| 1) Change                     | D                    | QUINTANA LAZARA    | 13992 SW 8TH ST |  |  |
|                               |                      | ,                  | MIAMI, FL 33184 |  |  |
| Remove                        |                      |                    |                 |  |  |
| 2) Change                     | Р                    | Carrion, Cynthia L | 13992 SW 8TH ST |  |  |
| Add                           |                      |                    | MIAMI, FL 33184 |  |  |
| ✓ Ramove                      |                      |                    |                 |  |  |
| 3 ) Change                    | VP                   | LINARES, JOSE A    | 13992 SW 8TH ST |  |  |
| Add                           |                      |                    | MIAMI, FL 33184 |  |  |
| <b>√</b> Remove               |                      |                    |                 |  |  |
| 4) Change                     | PTD                  | QUINTANA LISSY     | 13992 SW 8TH ST |  |  |
| Add                           |                      |                    | MIAMI, FL 33184 |  |  |
| Remove                        |                      |                    |                 |  |  |
| 5) Change                     | CEO                  | QUINTANA LISSY     | 13992 SW 8TH ST |  |  |
| Add                           |                      |                    | MIAMI, FL 33184 |  |  |
| Remove                        |                      |                    |                 |  |  |
| б) Change                     |                      |                    |                 |  |  |
| Add                           |                      |                    |                 |  |  |
| Remove                        |                      |                    |                 |  |  |
|                               |                      |                    |                 |  |  |

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| N/A   |  |                 |
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| If an amendment provides for an exchange, reclassification  | or cancellation of issued shar                                   | es.             |
| provisions for implementing the amendment if not contained  | or cancellation of issued shared in the amendment itself:        | es.             |
| provisions for implementing the amendment if not contains<br>(if not applicable, indicate N/A)        | or cancellation of issued shared in the amendment itself:        | es,             |
| <u>provisions for implementing the amendment if not contains</u><br>(if not applicable, indicate N/A) | or cancellation of issued shared in the amendment itself:        | es.             |
| <u>provisions for implementing the amendment if not contains</u><br>(if not applicable, indicate N/A) | or cancellation of issued shared in the amendment itself:        | es,             |
| provisions for implementing the amendment if not contains<br>(if not applicable, indicate N/A)        | or cancellation of issued shared in the amendment itself:        | es.             |
| provisions for implementing the amendment if not contains<br>(if not applicable, indicate N/A)        | or cancellation of issued shared shared in the amendment itself: | <del>ts</del> . |
| provisions for implementing the amendment if not contains<br>(if not applicable, indicate N/A)        | or cancellation of issued shared shared in the amendment itself: | es,             |
| provisions for implementing the amendment if not contained  | or cancellation of issued shared in the amendment itself:        | <b>**</b> .     |
| provisions for implementing the amendment if not contains<br>(if not applicable, indicate N/A)        | or cancellation of issued shared shared in the amendment itself: | ts.             |
| provisions for implementing the amendment if not contains<br>(if not applicable, indicate N/A)        | or cancellation of issued shared in the amendment itself:        | es.             |

( H13000242046 35)

| The date of each amendmen date this document was signed | t(s) adoption: 10/31/2013  | , if other than the |
|---|--|---------------------|
| Effective date if applicable;                           | 10/31/2013   |                     |
| Distance duct ST W/MICHANIC                             | (no more than 90 days after amendment file date)   | ~                   |
| Adoption of Amendment(s)                                | (CHECK ONE)  |                     |
|   | re adopted by the shareholders. The number of votes east for the amendment(s) ere sufficient for approval.   |                     |
| The amordinent(s) wishwe must be separately provide     | re approved by the shareholders through voting groups. The following statement ed for each voting group entitled to vote separately on the amendment(s): |                     |
| "The number of vote:                                    | s east for the amendment(s) was/were sufficient for approval   |                     |
| by  |  |                     |
|   | (voting group)   |                     |
| The amendment(s) was/we action was not required.        | re adopted by the board of directors without shareholder action and shareholder  |                     |
| The amendment(s) was/wer action was not required.       | re adopted by the incorporators without shareholder action and shareholder   |                     |
| Dated_10/3  | 31/2018  |                     |
| Signoture   | 1AB  |                     |
| Q3  | By a divelor, production or other officer - if directors or officers have not been   | _                   |
|   | elected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed liduciary by that fiduciary)                              |                     |
|   | LISSY QUINTANA   |                     |
|   | (Typed or printed name of person signing)  | <b>-</b>            |
|   | PRESIDENT  |                     |
|   | (Title of person signing)  |                     |