P09000 100290

(Red	questor's Name)	
(Add	dress)	
(Add	dress)	 -
(City	//State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL.
(Bus	siness Entity Nar	me)
(Doc	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to f	Filing Officer:	
		•

Office Use Only



300307204003

01/05/16--01012--018 **35.80

S TALLENT FEB 1 2 2018







January 9, 2018

GAIL L MCLEAN DESENA ADVANTAGE HAIR TECHNOLOGY, INC 3601 WEST KENNEDY BOULEVARD #G TAMPA, FL 33609

SUBJECT: ADVANTAGE HAIR TECHNOLOGY, INC.

Ref. Number: P09000100290

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

THE DATE OF THE AMENDMENTS ADOPTION MUST BE A DATE PRIOR TO TODAY'S DATE OR ON OR PRIOR TO THE DATE SIGNED.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Susan Tallent Regulatory Specialist II

Letter Number: 018A00000545

COYER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	ADVANTAGE H	AIR TECHNOLOGY, INC	
DOCUMENT NUMBE	R: P09000100290		
The enclosed Articles of	Amendment and fee are su	bmitted for filing.	
Please return all correspondent	ondence concerning this ma	tter to the following:	
G	ail L Melcan Desena		
		Name of Contact Person	1
Α	DVANTAGE HAIR TECH	INOLOGY, INC	
		Firm/ Company	
30	601 WEST KENNEDY BO	ULEVARD#G	
_		Address	ar advalant frame of the filter and
T	ampa, FL 33609		
_		City/ State and Zip Cod	E
anagent	nairl@aol.com		· · · · · · · · · · · · · · · · · · ·
	E-mail address: (to be us	sed for future annual report	notification)
For further information of	concerning this matter, pleas	se can:	
Gail L Mclean Desena		at (de & Daytime Telephone Number
Name of Contact Person		Area Co	de & Daytime Telephone Number
Enclosed is a check for t	he following amount made	payable to the Florida Depa	artment of State:
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
<u>Maitir</u>	ng Address	<u>Street</u>	Address
Amen	dment Section	Amendment Section	
	on of Corporations lox 6327		on of Corporations Building
· · · · · ·	assee, FL 32314		Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

ADVANTAGE HAIR TECHNOLOGY, INC	<u> </u>		
(Name of Corporation as c	urrently filed with the Florida D	ept. of State)	
P09000100290			
(Document Ni	umber of Corporation (if known)		
Pursuant to the provisions of section 607.1006, Florida Statutits Articles of Incorporation:	tes, this <i>Florida Profit Corporation</i>	adopts the following amendment(s) to
A. If amending name, enter the new name of the corpora	tlon:		
		The new	
name must be distinguishable and contain the word "con	rporation," "company," or "inco	orporated" or the abbreviation	
"Corp.," "Inc.," or Co.," or the designation "Corp." "Inc.	c," or "Co". A professional corp	poration name must contain the	
word "chartered," "professional association," or the abbrev	viation "P.A."	<i>}</i>	
The Third of the Company of the Comp			
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS			T
		1977	
			П
C. Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)		<u> </u>	
		p. un	
D. If amending the registered agent and/or registered off new registered agent and/or the new registered office	<u>address:</u>	name of the	
Name of New Registered Agent			
Œ	lorida street address)		
New Registered Office Address:		, Florida	
The state of the s	(City)	(Zip Code)	
New Registered Agent's Signature, if changing Registere I hereby accept the appointment as registered agent. I am f	d Agent: familiar with and accept the obliga	tions of the position.	

Signature of New Registered Agent, if changing

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.

<u>X</u> Change	<u>PT</u>	John Doe	
X Remove	¥	Mike Jones	
_X Add	<u>\$V</u>	Sally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	PSD	Joseph Desena	3601 WEST KENNEDY BOULEV
Add			SUITE G
X Remove			TAMPA, FL 33609
2) Change	PSD	Gail L Mclean Desena	3601 WEST KENNEDY BOULEV
X Add			\$ UITE G
Remove			TAMPA, FL 33609
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
f an amendment provides for an exch	hange, reclassification, or cancellation of issued shares.
provisions for implementing the ame (if not applicable, indicate N/A)	endment if not contained in the amendment itself:
provisions for implementing the ame (if not applicable, indicate N/A)	endment if not contained in the amendment ltself:
provisions for implementing the ame (if not applicable, indicate N/A)	endment if not contained in the amendment ltself:
provisions for implementing the ame (if not applicable, indicate N/A)	endment if not contained in the amendment ltself:
provisions for implementing the ame (if not applicable, indicate N/A)	endment if not contained in the amendment itself:
provisions for implementing the ame (if not applicable, indicate N/A)	endment if not contained in the amendment itself:
provisions for implementing the ame (if not applicable, indicate N/A)	endment if not contained in the amendment itself:
provisions for implementing the ame	endment if not contained in the amendment itself:

	January: 1, 2018	
The date of each amendment(s):	adoption:	, if other than the
date this document was signed.		
	nuary 1, 2018	
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the E	block does not meet the applicable statutory filing requirements, this Department of State's records.	s date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ac by the shareholders was/were s	dopted by the shareholders. The number of votes east for the amendme sufficient for approval.	ent(s)
☐ The amendment(s) was/were apmust be separately provided for	pproved by the shareholders through voting groups. The following stator each voting group entitled to vote separately on the amendment(s):	ement ement
"The number of votes can	st for the amendment(s) was/were sufficient for approval	
by	(voting group)	
,	(voting group)	
action was not required. The amendment(s) was/were a	dopted by the board of directors without shareholder action and shareholder by the incorporators without shareholder action and shareholder	
action was not required.		
Decembe	-27,2017 APS. JAN 131 2018	
Dated		
M	Jan 1 ^{5T} 2018 Jan 1 ^{5T} 2018	
Signatur	much the son	
(BV 3	director, president or other officer – if directors at officers have not by	een
selec	ted, by an incorporator - if in the hands of a receiver, trustee, or other	court
арро	inted fiduciary by that fiduciary)	
	Joseph Desena	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	

Section Section