200020344

(Requestor's Name)	
(Address)	2002367
(City/State/Zip/Phone #)	·
PICK-UP WAIT MAIL	06/28/1201
(Business Entity Name)	h
(Document Number) Certified Copies Certificates of Status	Am
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COVER LETTER

TO: Amendment Section
Division of Corporations

Division of Corporations		
NAME OF CORPORATION: Salon Vas	o II, Inc.	
DOCUMENT NUMBER: P10000203	44	
The enclosed Articles of Amendment and fee are submi	tted for filing.	
Please return all correspondence concerning this matter	to the following:	
Michael Kahl		
(1)	Name of Contact Person	n)
Salon Vaso II, Inc.		
	(Firm/ Company)	
1521 Alton Rd # 96		
	(Address)	
Miami Beach, FL 33139		
(0	City/ State and Zip Cod	e)
info@salonvaso.co		
E-mail address: (to be used f	or future annual report	notification)
For further information concerning this matter, please ca	ıll:	
Michael Kahl	_{at (} 305	674-7470
(Name of Contact Person)	(Area C	ode & Daytime Telephone Number)
Enclosed is a check for the following amount made pays	able to the Florida Depa	artment of State:
S35 Filing Fee S43.75 Filing Fee & C 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	Ameno Divisio Cliftor 2661 E	Address Iment Section on of Corporations Building executive Center Circle assee, IFL 32301



July 18, 2012

MICHAEL KAHL SALON VASO II, INC. 1521 ALTON RD #96 MIAMI BEACH, FL 33139

SUBJECT: SALON VASO II INC. Ref. Number: P10000020344

We have received your document for SALON VASO II INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please accept our apology for failing to mention this in our previous letter.

The document you submitted has been prepared pursuant to nonprofit statutes (chapter 617, Florida Statutes). As the entity was originally filed as a corporation for profit, this document should be filed pursuant to chapter 607, Florida Statutes.

We are enclosing the proper form(s) with instructions for your convenience.

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.

Tina Roberts Regulatory Specialist II

Letter Number: 112A00019011



July 2, 2012

MICHAEL KAHL SALON VASO II INC. 1521 ALTON RD #96 MIAMI BEACH, FL 33139

SUBJECT: SALON VASO II INC. Ref. Number: P10000020344

We have received your document for SALON VASO II INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please show title for Andres Cunningham such as: P,V,S,D or T. Officer is not an acceptable title.

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.

Tina Roberts Regulatory Specialist II

Letter Number: 712A00017875

SECRETARY OF STATE TALLAHASSEE, FLORIDA

12 AUG -3 PM 3: 09

Articles of Amendment to Articles of Incorporation

SALON VASO II, INC.			_
(Name of Corporation as currently	y filed with the Florida Dep	t. of State)	
P1000020344 (Document Number	of Corporation (if known)	<u>,</u>	-
Pursuant to the provisions of section 607.1006, Flor its Articles of Incorporation:	•	ofit Corporation adopts the followin	g amendment(s) to
A. If amending name, enter the new name of the	corporation:		
name must be distinguishable and contain the w "Corp.," "Inc.," or Co.," or the designation "Co			
word "chartered," "professional association," or to		ojessionai corporation name musi	coman me
B. Enter new principal office address, if applical (Principal office address MUST BE A STREET A.	<u>ble:</u> DDRESS)		-
			_
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE I	B <i>OX</i>)		-
D. If amending the registered agent and/or regis new registered agent and/or the new registered		rida, enter the name of the	-
Name of New Registered Agent			
	(Florida street address)		
New Registered Office Address:		, Florida	
	(City)	(Zip Code)	-
New Registered Agent's Signature, if changing R I hereby accept the appointment as registered agent		cept the obligations of the position.	
Signature of	New Registered Agent, if che	anging	

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.

X Change	PT	John Doc	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	D	Andrew Cunningham	1521 Alton Rd # 96
<u> </u>			Miami Beach, FL 33139
Remove			
2)Change			
Add			
Remove			
3) Change	•		
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	heets, if necessary).	(Be specific)		
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			<u></u>	
		L 1 1 4	<u>ion, or cancellatio</u>	n of issued shares,
an amendment p	provides for an exc	nange, reciassificat	almed in the amon	
rovisions for imp	plementing the amo	nange, reciassificat endment if not cont	ained in the amen	dment itself:
provisions for imp	provides for an exc plementing the amount ple, indicate N/A)	nange, reclassificat endment if not cont	ained in the amen	dment itself:
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an amendment provisions for important (if not applica	plementing the amo	nange, reclassificat	ained in the amen	dment itself:
rovisions for imp	plementing the amo	nange, reclassificat	ained in the amen	dment itself:
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rovisions for imp	plementing the amo	nange, reclassificat	ained in the amen	dment itself:

The date of each amendment(s)	adoption: 1014 26,2012
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.
• •	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):
"The number of votes ca	ist for the amendment(s) was/were sufficient for approval
by	(voting group)
☐ The amendment(s) was/were a action was not required.	adopted by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were a action was not required.	adopted by the incorporators without shareholder action and shareholder
Dated July 2	26th, 2012— 1
(By a select	a director, president or other officer – if directors or officers have not been sted, by an incorporator – if in the hands of a receiver, trustee, or other court sinted fiduciary by that fiduciary)
	Michael Kahl
	(Typed or printed name of person signing)
	PST
	(Title of person signing)