P10000066269

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COVER LETTER

TO: Amendment Section Division of Corporations

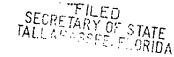
NAME OF CORPOR	ATION: DUZL 1	LEALTY INC	
DOCUMENT NUMB	ration: <u>DS\ZL (</u> ber: <u>P100000</u>	6269	
The enclosed Articles	of Amendment and fee are su	abmitted for filing.	
Please return all corres	pondence concerning this ma	itter to the following:	
	DARIC	Name of Contact Person	
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-	DITTL REAL	Firm/ Company	
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	LAKE WORT	H. CL 331	167
		City/ State and Zip Cod	e
	DJ1ZLLEAUTY E-mail address: (to be us	1@ GMAIL. CO.	M
	E-mail address: (to be us	sed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
DALIO C			370-5259
Name o	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:
\$35 Filing Fee	□\$43.75 Filing Fee & 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)
Mail	ing Address	Street	Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address

Amendment Section **Division of Corporations** Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation



Name of Corporation as currently filed with the Florida Dept. of State (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: 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". A 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) D. If amending 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 New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations 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 Rémove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT</u>	John Doe		V		
X Remove	<u>V</u>	Mike Jones				
X Add		Sally Smith				
Type of Action (Check One)	<u>Title</u>	<u>Name</u>		<u>Addres</u> s		
1) Change	NA					
Add						
Remove						
2) Change	NA					
Add	- (* *			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
Remove						
3) Change	MA				ਰੀ 	SEC
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4) Change					FH 12: 24	STAI
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Remove						
5) Change						
Add			·			
Remove						
Kenrove					·	
6) Change						
Add						
Remove						

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)		
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F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,		- 뜨유
provisions for implementing the amendment if not contained in the amendment itself:	PH 12: 21	
(if not applicable, indicate N/A)	21	22
Alm	•	A
		

The date of each amendment(s) adoption: date this document was signed.	, if other than the
Effective date if applicable: 8-26-15 (no more than 90 days after amendment file date)	
(no more than 90 days after amenament fite date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will document's effective date on the Department of State's records.	not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
(voling group)	TA S
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	SECRETY ALL ARD
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	FILED STATE
Dated 8-25-15	STATE LORID/
Signature	_
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
(Typed or printed name of person signing)	
PRESIDENT (Title of person signing)	