

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name

: DERHY FINANCIAL SERVICES LLC

Account Number : I20090000059

Phone Fax Number : (786)380-3472 : (305)374-8833

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

Emmil	Address:
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## COR AMND/RESTATE/CORRECT OR O/D RESIGN MICHAEL'S SALON SPA INC

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Corporate Filing Menu

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## **COVER LETTER**

TO: Amendment Section

Division of Corpo	orations		
NAME OF CORPOR	MICHAEL'S	S SALON SPA I	NC
DOCUMENT NUMI	P1000008433		
	of Amendment and fee are su	bmitted for filing.	
	pondence concerning this ma	•	
	DVIR DERHY	_	
		Name of Contact Perso	n
	<b>DERHY FINANC</b>	IAL SERVICES	LLC
		Firm/ Company	
	99 NW 183rd St	# 138	
		Address	
	Miami, FL 33169		
	•	City/ State and Zip Cod	e
DV	R@BELLSOUTH	I.NET	
	E-mail address: (to be us	sed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
DVIR DERHY	1	at (786	3803472
Name o	f Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made j	payable to the Florida Depa	artment of State:
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Fitling Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ame Divis P.O.	ing Address adment Section aion of Corporations Box 6327 hassee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle ssee, FL 32301

Articles of Amendment to

Articles of Incorporation



## MICHAEL'S SALON SPA INC

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

P10000084331

(Document Number of Corporation (if known)

lment(s) to

the ab
<del></del>
-

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.

Example: X.Change	<u>PT</u>	John Doe	
X Remove	¥	Mike Jones	
X Add	<u>s</u> y	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
Change Add Remove	5	CORRÉIA ERICKA F	15051 ROYAL OAKS LANE # 805 NORTH MIAMI BEACH, FL 33181
2) Change Add Remove		_	
3) Change Add Remove			
4) Change Add Remove			
5) Change Add Remove			
6) Change Add Remove		_	

stach additional sheets, if necessary).	cles, enter change(s) here: (Be specific)	
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an amendment provides for an excharovisions for implementing the amen (if not applicable, indicate N/A)	inge, reclassification, or cancellat dment if not contained in the am	ion of issued shares, endment itself:

The date of each amendment(s) ad	100 Deption: 04/18/2012
Effective date if applicable:	
	(no more than 90 days after amendment file date)
Adoption of Amendment(3)	(CHECK ONE)
The amendment(s) was/were ado by the shareholders was/were sur	pted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.
	roved by the shareholders through voting groups. The following statement 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	*1
	(voting group)
action was not required.	pted by the board of directors without shareholder action and shareholder
Dated 04/18/2	2012
<del></del>	OMI ASAYAG
(By a di	rector, president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)
	SHLOMI ASAYAG
	(Typed or printed name of person signing)
	PRESIDENT
_	(Title of person signing)