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## Florida Department of State Division of Corporations

Electronic Filing Cover Sheet

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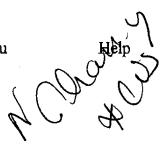


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	Division of Corporations	į
}	Fax Number : (950)617-6380	;** '
From:		,
120000	Account Name : TAX PLACE	97 
	Account Number : I20100000011	<u> </u>
1	Phone : (954)369-4444	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	Fax Number : (954)369-4446	
	ne email address for this business entity to al report mailings. Enter only one email add	
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Electronic Filing Menu

Corporate Filing Menu



## **Articles of Amendment** to

	Articles of Incor	poration	
	STYLUS BEAUTY SALON	LCORP	
	(Name of Corporation as currently filed with th	The state of the s	
	P11000064807		
<del></del>	(Document Number of Corporation	a (if known)	
	e provisions of section 607.1006, Florida Statutes to its Articles of Incorporation:	, this Florida Profit Corporation adopts th	e following
A. If amendi	ng name, enter the new name of the corporation:		
	STYLE BEAUTY SALON	CORP The	new
abbreviation '	e distinguishable and contain the word "corpo "Corp.," "Inc.," or Co.," or the designation "Cor ntain the word "chartered," "professional associate	p," "Inc," or "Co". A professional corpor	r the ation
	principal office address, if applicable: ice address <u>MUST BE A STREET ADDRESS</u> )		F11 11 JUL 28
	v mailing address, if applicable: address <u>MAY BE A POST OFFICE BOX</u> )		LED <b>AH 9: 55</b>
	ng the registered agent and/or registered office a tered agent and/or the new registered office addr		

Name of New Registered Agent:		
New Registered Office Address:	(Florida street address)	
		, Florida
	(City)	(Zip Code)

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

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u amendin	g the Officers and/or Directors.	enter the title and name of each	unicer/airector being
	nd title, name, and address of ea	en Officer and/or Director being	g added:
(Attach ada	litional sheets, if necessary)		
<u>Title</u>	Name	Address	Type of Action
	-		
			D Add
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	1		
E. <u>If amen</u>	ding or adding additional Articl	cs. enter change(s) here:	
(attach a	dditional sheets, if necessary). (	Be specific)	
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	mendment provides for an excha		
<u>provisi</u>	ons for implementing the amend	ment if not contained in the am	<u>endment itself:</u>
(if n	ot applicable, indicate N/A)		
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		Page 2 of 3	

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The date of za	ch emendment	(s) adoption: <u>07</u>	7/28/2011			
Effective date		07/28/2011	(date of adop	tion is required	i)	
CONCLUVE date	n applicable.		90 days after am	endment file da	ite)	
·	! !					
Adoption of A	mendment(s)	( <u>CH</u>	HECK ONE)			
		re adopted by the ere sufficient for		The number of v	votes cast for th	e amendment(s)
		re approved by the differ each voting				
"The n	umber of votes	cast for the amen	ndment(s) was/w	ere sufficient fo	or approval	
by		(voting group)				
		(voting group)				
	nent(s) was/we not required.	re adopted by the	e board of directo	ors without shau	reholder action	and shareholder
	nent(s) was/wer not required.	re adopted by the	e incorporators w	ithout sharehol	der action and	shareho <b>lder</b>
		28/2011		-		
	Signature C	lusani	tag.	costa	<u>.                                    </u>	
	sele	a director, presidented, by an incorporated fiduciary between the control of the	porator – if in th	e hands of a rec		
			EUSAN I	TA 9	· CoST	A
		\* <u>\</u>	rped or printed not be seen of person signing	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	Ties.	c.kop
		(Title o	of person signing	) <u> </u>	1	<u> </u>