P11000018061

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SECRETARY OF STATE

C. LEWIS

AUG 2 3 2013

EXAMINER

COVER LETTER

TO: Amendment Section

Division of Corporations KING OF CUTS CORP NAME OF CORPORATION: P11000069061 **DOCUMENT NUMBER:** The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Jason Santiago Name of Contact Person King of Cuts Corp. Firm/ Company 702 SW Goldshine Court Address Palm City, FL 34990 City/ State and Zip Code isantiago1053@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Jason Santiago Name of Contact Person Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: ■ \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) **Mailing Address Street Address** Amendment Section Amendment Section **Division of Corporations** Division of Corporations P.O. Box 6327 Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

Articles of Amendment Articles of Incorporation of

FILED

King of Cuts Corp.

13 AUG 21 PM 2: 32

(Name of Corporation as currently filed with the Florida Dept. of State) P11000069061

SECRETARY OF STATE TALLAHASSEE, FLORIDA

lment(s) to

(Document Numbe	r of Corporation (if know	n)	
Pursuant to the provisions of section 607.1006, Floits Articles of Incorporation:	orida Statutes, this <i>Florida</i>	Profit Corporation adopts t	he following amendme
A. If amending name, enter the new name of th	e corporation:		
name must be distinguishable and contain the	word "corporation" "c	omnam: " or "incorporated	The new
"Corp.," "Inc.," or Co.," or the designation "C word "chartered," "professional association," or	orp," "Inc," or "Co".	A professional corporation r	ame must contain the
B. Enter new principal office address, if applies (Principal office address MUST BE A STREET A			
			
C. F-4			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	<u>BOX</u>)		
			
D. If amending the registered agent and/or registered agent and/or the new register		Florida, enter the name of t	<u>he</u>
Name of New Registered Agent			
	(Florida street addr	P(S)	
New Registered Office Address:	12 13 744 31 32 444	, Florida	
	(City)		ip Code)
New Registered Agent's Signature, if changing I hereby accept the appointment as registered agen	Registered Agent: nt. I am familiar with and	d accept the obligations of th	e position.
Cr.	AN	-	

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.

Example: X Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	Р	Edward L. Blancaneaux	702 SW Goldshine Court
Add		· · · · · · · · · · · · · · · · · · ·	Palm City, FL 34990
X Remove			
2) Change	Р	Jason Santiago	702 SW Goldshine Court
X Add			Palm City, FL 34990
Remove			
3) Change	 		
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add	,		
Remove			
6) Change			
Add			
Remove			

tach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
	
an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
rovisions for implementing the ame	ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
,	

The date of each amendment(s) adoption: _	August 19, 2013	FIL	FD, if other than th
date this document was signed.			- W3 0.7
Effective date if applicable:		13 AUG 21	PH 2: 32
	(no more than 90 days after amendment	fils date) TALL AHASSE	OF STATE E. FLORIDA
Adoption of Amendment(s)	HECK ONE)		
☐ The amendment(s) was/were adopted by the by the shareholders was/were sufficient for		r the amendment	(s)
☐ The amendment(s) was/were approved by must be separately provided for each votil	the shareholders through voting groups. The ng group entitled to vote separately on the an		rent
"The number of votes cast for the am	endment(s) was/were sufficient for approval		
by	roting group)	27	
(v	oting group)		
☐ The amendment(s) was/were adopted by the action was not required.	e board of directors without shareholder acti	on and sharehold	ler
■ The amendment(s) was/were adopted by th action was not required.	e incorporators without shareholder action as	nd shareholder	
Dated_ August 1	19, 2013		
Signature Dewood	L. Planame		
selected, by an in	esident or other officer – if directors or office corporator – if in the hands of a receiver, true try by that fiduciary)		
Edv	ward L. Blancaneaux	(
	(Typed or printed name of person signature)	gning)	
Pre	sident		
	(Title of person signing)	 	