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CLEWAS

COVER LETTER

TO: Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

NAME OF CORPORAT	ION SKIN DE	ERMATOLD 64	AND COSMETIC	SERVICES, P.
DOCUMENT NUMBER				
DOCUMENT NUMBER	1 110000	7 13 3 8 1		
The enclosed Articles of A	mendment and fee are su	bmitted for filing.		
Please return all correspon	dence concerning this ma	tter to the following:		
	Ross	C WHE	ELER	
		Name of Contact Person	1	
SK	IN DERMA	TOLOGY AND	COSMETIC SER	VICES, P.A.
		Firm/ Company		•
	942 SAX	Address	EIB	
		Address		
	ORANGE	CITY , FL 3	2763	
		CITY FL 3 City/ State and Zip Code	e	
	RUSSCINHS	ELER à yahoo	Cura	
 		sed for future annual report		
For further information con	ncerning this matter, pleas	se call:		
ROSS C W	HEELER	at (407		
Name of Co	ontact Person	Area Co	de & Daytime Telephone Num	ber
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)	
Amendn	Address nent Section of Corporations	Amend	Address Iment Section on of Corporations	

Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle

Articles of Amendment to

Articles of Incorporation

	Articles of Inc	-	•
SKin Derm.	of ato 109 (Corporation ascurrent)	And Cosm y fled with the Florida Dept. of	netic Services
	P1100009	1	4,77,
		f Corporation (if known)	
Pursuant to the provisions of section 607.100 as Articles of Incorporation:	06, Florida Statutes, this	Florida Profit Corporation adopts	the following amendment(s) to
. If amending name, enter the new nam			
Ν/			The new
name must be distinguishable and contain "Corp.," "Inc.," or Co.," or the designati word "chartered," "professional associatio	ion "Corp," "Inc," or "	'Co". A professional corporation	
B. <u>Enter new principal office address, if a</u> Principal office address <u>MUST BE A STR</u>		N/A	-
C. Enter new mailing address, if applica (Mailing address MAY BE A POST OF		N/A	# 10 mm
D. If amending the registered agent and/onew registered agent and/or the new r			$oldsymbol{\omega}_{\mathcal{L}_{0}(\mathbb{R}^{n})}$
Name of New Registered Agent	(SAME)	NO CHANGE	
-	(Florida str	reet address)	
New Registered Office Address:		, Flo	orida (Zip Code)
·			
New Registered Agent's Signature, if cha hereby accept the appointment as registere			the position.
	N/,	Agent, if changing	
·····	Signature of New F	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 <math>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	Doe	
X Remove	<u>V</u> <u>Mike</u>	<u>Jones</u>	
X Add	<u>SV</u> <u>Sally</u>	· Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) X Change	CEO	ROSS C WHECLER	942 SAXON BLVD
Add			STE:B
Remove			ORANGE CITY, FL 32763
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			·
5) Change			No.
Add			
Remove			
6) Change			
Add	,		
Remove			

Attach	nding or adding add additional sheets, if r	necessary). (B	e specific)			
<u> </u>	MA		<u>,, , , , , , , , , , , , , , , , , , ,</u>			
<u></u>				·		
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						<u> </u>
lf an a	amendment provides	for an exchang	e, reclassification	on, or cancellatio	on of issued shares,	
<u>provi</u> (,	isions for implementi if not applicable, indi	cate N/A)	tent it not contr	med in the sinen	<u>iament uscii:</u>	
	10/10					
					-	
				v/		
	····					
			 			<u>.</u>

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	April . To be The
Effective date if applicable: ASAP	mendment file date) 15 JUH - 4 PH 3: 54
(no more than 90 days after a	mendment file date) 15 JUN - L. PH 3.51
Note: If the date inserted in this block does not meet the applicable statutory	
document's effective date on the Department of State's records.	thing requirements, this date was not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of volume by the shareholders was/were sufficient for approval.	otes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting gr must be separately provided for each voting group entitled to vote separately	
"The number of votes cast for the amendment(s) was/were sufficient fo	r approval
by	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without share action was not required.	holder action and shareholder
☐ The amendment(s) was/were adopted by the incorporators without sharehold action was not required.	er action and shareholder
Dated Collision	
Signature Makk	
(By a director, president or other officer - if director	
selected, by an incorporator – if in the hands of a re	eceiver, trustee, or other court
appointed fiduciary by that fiduciary)	
ROSS C WHE	ELEL
(Typed or printed name of perso	n signing)
CEO	
(Title of person sign	ing)