## P12000010003

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12 FEB 13 PM 3: ,I SECRETARY OF STATE TALLAHASSEE FLORIG

FEB 14 2012 T. ROBERTS

## **COVER LETTER**

TO: Amendment Section

Division of Corpo	orations		
NAME OF CORPOR	$\mathcal{D}$ $\mathcal{A}$ $\mathcal{D}$ $\mathcal{A}$ $\mathcal{A}$ $\mathcal{A}$ $\mathcal{A}$ $\mathcal{A}$	1 Merk Ha	ir Salon, Corp.
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
_	Lois	Se Reyes Name of Contact Person	
	S40	emar Serv	rices, UC
	7050 N	Firm/ Company  W 177+h 4  Address	± 201
	Hizlest	Address  1 FL 330  City/ State and Zip Code	15
		Stemarser and for future annual report	
	concerning this matter, pleas		
Luisa	Reyes of Contact Person	at ( <del>786</del> _	S54-9240 de & Daytime Telephone Number
Name o	f Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	irtment 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)
	ing Address		Address
	ndment Section		ment Section n of Corporations
	sion of Corporations Box 6327		Building
	hassa FI 22214		vecutive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation



Beauty Mark Hair Salon, Corbination SECRETARY OF STATE (Name of Corporation as currently filed with the Florida Dept. of State)

P 12000010003

(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:

charterea, projessional association,	or the abbreviation "I		onal corpora	rated" or the al tion name must o
Inter new principal office address, if apparent				
nter new mailing address, if applicable				
	CE ROY)			
Mailing address <u>MAY BE A POST OFFI</u>	CL BOX			
Mailing address <u>MAY BE A POST OFFI</u>	<u>CL BOX</u> )			
amending the registered agent and/or	registered office addre	ss in Florida, e	nter the nam	e of the
amending the registered agent and/or	registered office addre	ss in Florida, e	nter the nam	e of the
amending the registered agent and/or w registered agent and/or the new reg	registered office addre istered office address:		nter the nam	e of the
amending the registered agent and/or ew registered agent and/or the new reg	registered office addre		nter the nam	e of the

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: <u>X</u> Change	<u>PT</u>	John Doc	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1)Change Add Remove	NF	Silma Treto	2255 Ponce de Leon blud Cosal Gables, Fl 33134
2) Change Add Remove			
3 ) Change Add Remove		<del></del>	
4) Change Add Remove			
5) Change Add Remove			
6) Change Add Remove			

If amending or adding additional Articles, enter change(s) here: attach additional sheets, if necessary). (Be specific)						
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pro	amendment prov visions for implen (if not applicable,	nenting the ame	ange, reclassi ndment if not	fication, or can	cellation of issue e amendment it	ed shares, self:
<del>.</del>						
	<u> </u>					
				***		

	doption: $02/07/2012$
he date of each amendment(s) a	02/02/2012
ffective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
doption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes east for the amendment(s) afficient for approval.
	proved 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	(voting group)
	(voting group)
action was not required.	opted by the board of directors without shareholder action and shareholder opted by the incorporators without shareholder action and shareholder
Dated	2/09/2012
Signature _	Luduch
(By a d selecte	lirector, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other court ted fiduciary by that liduciary)
	Luise Reyes (Typed or printed name of person signing)
	Recistered Agent/Incorporate
	(Title of person signing)