Page 1 of 1

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 : 120090000059

Phone : (786)380-3472 Fax Number : (786)320-6879

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

COR AMND/RESTATE/CORRECT OR O/D RESIGN SONNY SALON INT'L INC

Certificate of Status	0
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Electronic Filing Menu Corporate Filing Menu

COVER LETTER

TO: Amendment Section

Division of Corporation	onş		•		
NAME OF CORPORATI	ON: SONNY SA	LON INT'L INC			
DOCUMENT NUMBER:	P1200005100	1			
The enclosed Articles of At	mendment and fee are su	bmitted for filing.			
Please return all correspond	lence concerning this mat	tter to the following:			
DV	/IR DERHY				
DE	RHY FINANC	Name of Contact Person	· ·		
		Firm/ Company			
99 NW 183rd St # 138					
		Address			
MIAMI, FL 33169					
	****	City/ State and Zip Code			
DVIR	@BELLSOUTH	I.NET			
*** · · · · · · · · · · · · · · · · · ·	E-mail address: (to be us	ed for future annual report	notification)		
For further information concerning this matter, please call:					
DVIR DERHY		_{at (} 786	、3803472		
	entact Person		de & 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 & 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)		
Division P.O. Box	ent Section of Corporations	Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Bullding xecutive Center Circle ussee, Ft. 32301		

Articles of Amendment to Articles of Incorporation of

SONNY SALON INT'L INC	•
(Name of Corporation as currently filed with the	Florida Dept. of State)
P12000051001	
(Document Number of Corporation ((if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this ts Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation;	
SOHO SALON & SPA INC	The new
name must be distinguishable and contain the word "corporati "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must contain the
3. Enter new principal office address, if applicable:	2485 N UNIVERSITY DRIVE
Principal office address MUST BE A STREET ADDRESS	CORAL SPRING, FL 33065
	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	2485 N UNIVERSITY DRIVE
(matting data est such the such such such such such such such such	CORAL SPRING, FL 33065
	·
D. If amending the registered agent and/or registered office ade	iress in Florida, enter the name of the
new registered agent and/or the new registered office addres	<u> </u>
Name of New Registered Agent	
(Florida s	reet address)
New Registered Office Address:	, Florida
(City	(Zip Code)
New Registered Agent's Signature, if changing Registered Agen hereby accept the appointment as registered agent. I am familiar	with and agreet the obligations of the positive
	And the oring allows by the positions of the position of the positio
Signature of New Registered	SER
	OF SE

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: John Doe X Change <u>PT</u> X Remove <u>v</u> Mike Jones _X Add ŝV Sally Smith Type of Action Title Name <u>Address</u> (Check One) ASAYAG SHLOMI 2485 N UNIVERSITY DRIVE 1) X_Change CORAL SPRING, FL 33065 _ Add Remove 2) ____ Change __ Add ___ Remove 3) _____ Change __ Add Remove _ Change _ Add Remove 5) ____ Change __ Add Remove 6) ____ Change

__ Add

Remove

ttach additional sheets, if necessary).	(Be specific)
,	
•	
an amendment provides for an exch	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
(if not applicable, indicate N/A)	noment is not contained in the amendment reserv-

The date of each amendment(s) adoption: 09/27/2012
Effective date if applicable:
(no more than 90 days after amendment file date)
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
□ The amendment(s) was were approved by the shareholders through voting groups. The following statement must be separately provided for 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)
☐ The amendment(s) was were adopted by the board of directors without shareholder action and shareholder action was not required.
☐ The amendment(s) was were adopted by the incorporators without shareholder action and shareholder action was not required.
Dated Signature
Signature
(By a director, president or other officer—if directors or officers have not been selected, by an incorporator—if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
SHLOMI ASAYAG
(Typed or printed name of person signing)
PRESIDENT
(Title of person signing)