## P12000056/23

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(Address)
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## COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: ISOM BOULLY ON line Inc.
DOCUMENT NUMBER: P1200056123
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Loy ho Osbor ne Name of Contact Person
151000 DEQUHY ON THE TOO.
319 NW 75th WOY
Address  Plonton, F1 33317  City/ State and Zip Code
E-mail address: (to be used for fixture annual report notification)
For further information concerning this matter, please call:
Lorna Osborna =1,954, 816 5302
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 Certificate of Status  Certificate of Status  Certified Copy (Additional copy is enclosed)  Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section  Street Address Amendment Section

Amendment Section
Division of Corporations
P.O. Box 6327
Taffahassee, FL 32314

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## Articles of Amendment to , Articles of Incorporation of

Iskad Beauty on line I	· · ·	
(Name of Corporation as currently filed with the	Florida Dept, of State)	
P12000056123		
(Document Number of Corporation (	(if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the	: following amendment(s) to
A. If amending name, enter the new name of the corporation:		
Island Beauty Line I	$\alpha$ .	The new
name must be distinguishable and contain the word "corporatio "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or ' word "chartered," "professional association," or the abbreviation	"Co". A professional corporation na	or the abbreviation
B. Enter new principal office address, if applicable:	39 NW 75th way	
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	Plantation, FI 33313	<u> </u>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		<u></u>
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address		
Name of New Registered Agent	5 <u>.</u>	
Nume of New Registered Agem		
(Florida sti	rcet address)	
New Registered Office Address:	, Florida	
(City)		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 p	
Signature of New Registered	Agent, if changing	Se CRE
		See Co

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.

X Change	<u>PT</u>	John De	<u>De</u>	
X Remove	Y	Mike Jo	ones .	
X Add	<u>sv</u>	Sally Sr	nith	
Type of Action (Check One)	Title		Name	Address
1) Change		<del></del>		
Add				<del></del>
Remove				
2) Change		<u></u>		
Add				
Remove				
3 ) Change		<del></del>		<del></del>
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Remove				
4) Change		_		
Add				
Remove				
5) Change				
Add		<del></del>	**************************************	
Remove				
Velliove				
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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