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FILED

R. WHITE NOV 2 1 2017

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	FION: NOVACUTIS INC	-	
DOCUMENT NUMBEI			
	Amendment and fee are su	ebmitted for filing.	
Please return all correspo	ndence concerning this ma	tter to the following:	
A	RASH YOUNESSI		
		Name of Contact Perso	n
NO	DVACUTIS INC		
	• • •	Firm/ Company	
28	75 NE 191st ST #500		
_		Address	
A	/ENTURA, FL 33180		
		City/ State and Zip Cod	le
ARASH	@NOVA-CUTIS.COM		
	E-mail address: (to be us	sed for future annual report	notification)
For further information ec	oncerning this matter, pleas	se call:	
ARASH YOUNESSI		at (2024666
Name of C	Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for th	e 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)
Amendi	Address nent Section of Corporations	Ameno	Address Iment Section on of Corporations Building

Tallahassee, FL 32301

Articles of Amendment FILED to

Articles of Incorporation 17, NOV 20 PM 3: 55

NOVACUTIS, INC.		SECRETARY OF DIRECT
· (<u>Name</u>	of Corporation as curren	tly filed with the Florida Dept. of State)
P13000032162		
	(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, thi	s Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new n	ame of the corporation:	
MEDAESTHETIC, INC.		The new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	nation "Corp," "Inc," or	on," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	2875 NE 191st ST #500	
(Principal office address MUST BE A S		AVENTURA, FL 33180
C. Enter new mailing address, if appl (Mailing address MAY BE A POST		N/A
D. If amending the registered agent ar		
new registered agent and/or the ne-	-	<u>\$\$:</u>
Name of New Registered Agent	N/A	
		treet address)
New Registered Office Address:	N/A	, Florida
		(City) (Zip Code)
New Registered Agent's Signature, if c I hereby accept the appointment as regist		t: with and accept the obligations of the position.
	Signature of New	Registered Agent of 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>	<u>John Do</u>	<u>oe</u>	
X Remove	$\underline{\mathbf{v}}$	Mike Jo	nes	
_X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
1) X Change	CFO		ALEN AGHAJANIAN	3031 NE 183rd LN
Add				AVENTURA, FL 33160
Remove				
2) Change		_		
Add				
Remove				
3) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		_		
Add				
Remove				

E. If amending or adding additional Arti (Attach additional sheets, if necessary).	(Be specific)
N/A	
<u> </u>	
- -	
	
If an amendment provides for an eych	nange, reclassification, or cancellation of issued shares,
provisions for implementing the amer	endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
N/A	
· · · · · · · · · · · · · · · · ·	

N/A		
The date of each amendment(s) adoption:	other th	an the
Effective date if applicable: 11/15/2017		
Effective date if applicable: 11/13/2017 (no more than 90 days after amendment file date)		
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be document's effective date on the Department of State's records.	e listed	as the
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.		
NOVEMBER 15TH, 2017 Dated		
(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)		
ARASH YOUNESSI		
(Typed or printed name of person signing)		
PRESIDENT		
(Title of person signing)		