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JUL - 9 2013

T. BROWN

## **COVER LETTER**

\_\_... \_ ... .. ..

**TO:** Amendment Section Division of Corporations

NAME OF CORPORAT	<sub>lion:</sub> The Blow D	ry Bar	
DOCUMENT NUMBER	P1300003447	2	
The enclosed Articles of A			
Please return all correspon	dence concerning this mat	tter to the following:	
Jo	yce Panapa		
		Name of Contact Persor	1
Th	ne Blow Dry Bai	<u>†</u>	
	<u> </u>	Firm/ Company	
<b>1</b> 1	1608 N. Dale Ma	abry	
<del></del>		Address	
Ta	ampa, Florida 3	3618	
		City/ State and Zip Code	
inana	na1@tampaha	/ rr com	
Jhaua	pa1@tampabay	sed for future annual report	notification)
	I man address (to be de	rea for facare annual report	nothioutiny
For further information co	ncerning this matter, pleas	se call:	
Lisa Streu		at ( <b>813</b>	, 810-6773
Name of C	ontact Person		de & Daytime Telephone Number
Enclosed is a check for the	c 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)
Amendr Divisior P.O. Bo	e Address nent Section of Corporations x 6327 ssee, FL 32314	Amend Division Clitton 2661 E	Address Iment Section on of Corporations Building executive Center Circle ussee, FL 32301



June 13, 2013

JOYCE PANAPA 11608 N DALE MABRY TAMPA, FL 33618

SUBJECT: THE BLOW BAR SALON INC.

Ref. Number: P13000034472

We have received your document for THE BLOW BAR SALON INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

## Adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Tracy L Lemieux Regulatory Specialist II

Letter Number: 613A00014947

## Articles of Amendment to Articles of Incorporation of

13 JUL -9 PM 2.
13 JUL -0 STATE
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The Blow Bar Salon inc.

P13000034472	nt Number of Corporation (	if (mayn)		
(Bocume)	it Number of Corporation (	ii kilowii)		
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit Corporation ado	pts the following	; amendment(s) to
A. If amending name, enter the new	ame of the corporation:	owdry Bar	, Inc.	The new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	tain the word "corporationation "Corp," "Inc," or	on," "compdny," or "incorpora "Co". A professional corporati		
B. Enter new principal office address,	if applicable:	11608 N. Dale M	labry	
(Principal office address <u>MUST BE A S</u>	TREET ADDRESS )	Tampa, Florida		
		33618	,	
C. Enter new mailing address, if appli (Mailing address MAY BE A POST)		N/A		
D. If amending the registered agent an new registered agent and/or the new			e of the	
Name of New Registered Agent	N/A	<u>s.</u>		
	(Elavida et	reet address)		
	N/A			
New Registered Office Address:	(City,	Florida	(Zip Code)	
New Registered Agent's Signature, if c I hereby accept the appointment as regist			of the positio.	
· Si	gnature of New 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)

\$ i

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.

Example: X 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)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	<u> </u>		
Add			<del> </del>
Remove			
2) Change			
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	<mark>ling or adding addi</mark> dditional sheets, if n	ecessary) (B	e specific)	<u> </u>		
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lf an am	nendment provides	for an exchang	e, reclassific	ation, or cance	llation of issued	<u>l shares,</u>
provisi	ons for implementi	ng the amendn	<u>nent if not co</u>	ntained in the :	amendment itse	<u>:If:</u>
-	not applicable, indic	cate N/A)				
/A						
		· <del></del> · · · · ·				

The date of each amendment(s) a	doption: 5/28/2013
Effective date <u>if applicable</u> : N/	A
<u></u>	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	( <u>CHECK ONE</u> )
The amendment(s) was/were ad- by the shareholders was/were st	opted by the shareholders. The number of votes cast 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)
action was not required.	opted by the board of directors without shareholder action and shareholder opted by the incorporators without shareholder action and shareholder
<sub>Dated</sub> 5/28/2	013
Signature (By a c	Joepel Panapa director, president or other officer – if directors or officers have not been
	ed, by an incorporator — if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)
- Physical Control of the Control of	
	Joyce Panapa
	(Typed or printed name of person signing)
	President
	(Title of person signing)