P13000035093

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	#)
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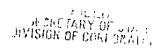
C LEWIS

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	FOOD SHOP US DRATION:	SA INC	
	P13000035093		
DOCUMENT NUN	ЛВЕК:		
The enclosed Article	es of Amendment and fee are su	abmitted for filing.	
Please return all corr	respondence concerning this ma	atter to the following:	
	LUCIA CHANG		
	FOOD SHOP USA INC	Name of Contact Perso	n
	8901 SW 157 AVE UNIT 2	Firm/ Company	
	MIAMI FL 33196	Address	
	· · · · · · · · · · · · · · · · · · ·	City/ State and Zip Cod	le
LI	JCYCH13@YAHOO.COM		
	E-mail address:	(to be used for future annua	al report notification)
			•
For further informati	on concerning this matter, plea	se call:	
LUCIA CHANG		786	4747635
Name	e of Contact Person	at (at Co	ode & Daytime Telephone Number
Enclosed is a check	for the following amount made	payable to the Florida Dep	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)
Mailing Address Amendment Section			Address dment Section
Division of Corporations		Division of Corporations	
P.O. Box 6327		Clifton Building	
Ta	llahassee, FL 32314		Executive Center Circle

Articles of Amendment to Articles of Incorporation of



FOOD SHOP USA INC

2017 JAN 30 AM 10: 05

(Name of Corporation as currently filed with the I P13000035093	Florida Dept. of State)
(Document Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this Incorporation:	s corporation adopts the following amendment(s) to its Articles of
A. If amending name, enter the new name of the corporation: VIVI'S BEAUTY SALON INC	The way
name must be distinguishable and contain the word "corporation "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
, ,	7400 NW S RIVER DRIVE
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	MEDLEY FL 33166-2559
•	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	7400 NW S RIVER DRIVE
	MEDLEY FL 33166-2559
D. <u>If amending the registered agent and/or registered office add new registered agent and/or the new registered office address</u>	
Name of New Registered Agent	
(Florida s	treet address)
New Registered Office Address:	, Florida
(City	
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 position.
Signature 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)

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>	John Doe	
X Remove	<u>V</u>	Mike Jones	•
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change			
Add			
Remove			·····
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
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)
_	
ı	If an amendment provides for an exchange, reclassification, or cancellation of issued shares,
•••	provisions for implementing the amendment if not contained in the amendment itself:
	(if not applicable, indicate N/A)

The date of each amendment(s) addate this document was signed.	loption:	JECHE JARY	if other than the
•		JAVISION OF CO	संग्रहित
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	2017 JAN 30	AM 10: 05
Adoption of Amendment(s)	(CHECK ONE)		
☐ The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendation flicient for approval.	dment(s)	
	roved by the shareholders through voting groups. The following each voting group entitled to vote separately on the amendment		
	for the amendment(s) was/were sufficient for approval		
by	(voting group)		
☐ The amendment(s) was/were ado action was not required.	pted by the board of directors without shareholder action and sha	reholder	
☐ The amendment(s) was/were ado action was not required.	pted by the incorporators without shareholder action and shareho	lder	
01/26/201	7		
Dated	Jeff Time The Control of the Control		
selected	irector, president or other officer – if directors or officers have not d, by an incorporator – if in the hands of a receiver, trustee, or other fiduciary by that fiduciary)		
	LUCIA CHANG		
	(Typed or printed name of person signing)		
	PRESIDENT/DIRECTOR		
	(Title of person signing)		