# P13000036712

Office Use Only



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Amend Name

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#### **COVER LETTER**

**Division of Corporations** NAME OF CORPORATION: Genesiskinspa Inc. DOCUMENT NUMBER: P13000036712 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Paola A. Gourdeau Name of Contact Person Genesiskinspa Inc Firm/ Company 9776 S. Military Trail Suite D2-2 Address Boynton Beach, FL 33436 City/ State and Zip Code genesismicrobladingspa@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (954 ) 857-3608

Area Code & Daytime Telephone Number Paola A Gourdeau Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: ☐ \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & ■\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) **Mailing Address** Street Address

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

TO: Amendment Section

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

#### Articles of Amendment to Articles of Incorporation of

### GENESISKINSPA INC.

## (Name of Corporation as currently filed with the Florida Dept. of State) P13000036712

(Document Number of Corporation (if known)

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

Genesis Microblading Spa, Inc.	The		
name must be distinguishable and contain the word "corporate "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must contain		
. Enter new principal office address, if applicable:	9776 S. Military Trail		
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	Suite D2-2		
	Boynton Beach, FL 33436		
(Mailing address MAY BE A POST OFFICE BOX)	6 Eaton Place		
	Boynton Beach, FL 33426		
D. If amending the registered agent and/or registered office ad- new registered agent and/or the new registered office addre			
new registered agent and/or the new registered office address  Name of New Registered Agent	<u>ess:</u>		
new registered agent and/or the new registered office address  Name of New Registered Agent  (Florida	street address)		
new registered agent and/or the new registered office address  Name of New Registered Agent	<u>ess:</u>		

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>\$V</u>	Sally Smith				
Type of Action (Check One)	<u>Title</u>	<u>Na</u>	<u>me</u>		<u>Addres</u> s	
1) Change		_		 <u> </u>		
Add						·
Remove						
2) Change				 		
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4) Change		<u> </u>		 		
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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)					
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If an amandment n	ravidas far an avahansa	waalassification a	n aonaellation of i	annod charas	
provisions for imp	rovides for an exchange lementing the amendme	<u>, reclassification, o</u> ent if not contained	in the amendmen	t itself:	
(if not applicat	le, indicate N/A)			<del></del>	
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Effective date if applicable:	
	(no more than 90 days after amendment file date)
Note: If the date inserted in this b document's effective date on the De	lock does not meet the applicable statutory filing requirements, this date will not be listed as the partment of State's records.
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 amendment(s) fficient for approval.
	roved 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)
	(voting group)
☐ The amendment(s) was/were ado action was not required.	pted by the board of directors without shareholder action and shareholder
The amendment(s) was/were ado action was not required.	pted by the incorporators without shareholder action and shareholder
Dated 2/10	/ / 7
Signature 1	
(By a diselected	rector, president or other officer – if directors or officers have not been l, by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)
	Padia A. Sourcicou (Typed or printed name of person signing)
	President/auner/operator.
	(Title of person signing)