

P/30000041038

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☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

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*Marie Chene
& Arnel*

FILED
2015 APR 24 PM 3:29
CLERK OF STATE
TALLAHASSEE, FLORIDA

OR
**00789, 00524, 00671 4/27/15*

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Ancient Skin Treatment
DOCUMENT NUMBER: P13000041038

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Robin C Buggs
Name of Contact Person
Ancient Herbal Care, Inc.
Firm/ Company
2932 Angela Ct
Address
Tampa FL 33610
City/ State and Zip Code

ancientherbalcare@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Robin Buggs at (813) 375-0065
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:

- | | | | |
|---|--|---|--|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$52.50 Filing Fee
Certificate of Status
Certified Copy
(Additional Copy
is enclosed) |
|---|--|---|--|

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

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 27, 2015

Robin C. Buggs
Ancient Herbal Care, Inc.
2932 Angela Ct.
Tampa, FL 33610

SUBJECT: ANCIENT SKIN TREATMENT, INC
Ref. Number: P13000041038

We have received your document for ANCIENT SKIN TREATMENT, 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):

Please check only one box under adoption of amendment on page 4.

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.

Annette Ramsey
Regulatory Specialist II

Letter Number: 215A00006183

RECEIVED
15 APR 24 PM 2:05
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

Articles of Amendment
to
Articles of Incorporation
of

FILED

2015 APR 24 PM 3:29

Ancient Skin Treatment Inc

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

FD P13000041038

(Document Number of Corporation (if known))

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

A. If amending name, enter the new name of the corporation:

Ancient Herbal Care, Inc The new
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation
"Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the
word "chartered," "professional association," or the abbreviation "P.A."

B. Enter new principal office address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)

Robin C Buggs
5770 Grand Blvd
New Port Richey FL 34652

C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

2932 Angela Ct
Tampa FL 33610

D. If amending the registered agent and/or registered office address in Florida, enter the name of the
new registered agent and/or the new registered office address:

Name of New Registered Agent Charde Barnett
2932 Angela Ct
(Florida street address)

New Registered Office Address: Tampa, Florida FL 33610
(City) (Zip 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 position.

Charde Barnett
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:

☒ Change PT John Doe

☒ Remove V Mike Jones

☒ Add SV Sally Smith

Type of Action
(Check One)

Title

Name

Address

- 1) ☐ Change
☒ Add
☐ Remove

CEO Robin Buggs

5770 Grand Blvd
New Port Richey FL
34652

- 2) ☐ Change
☒ Add
☐ Remove

VP Charde Barnett

2932 Angela St
Tampa FL 33610

- 3) ☐ Change
☒ Add
☐ Remove

VP Shakiyah Buggs

5770 Grace Blvd
New Port Richey FL
34652

- 4) ☐ Change
☒ Add
☐ Remove

CFO Samuel Cheatham Jr.

2932 Angela St
Tampa FL 33610

- 5) ☐ Change
☒ Add
☐ Remove

CEO Jonas Marseille

3015 North Hudson St
Tampa FL 33605

- 6) ☐ Change
☐ Add
☐ Remove

E. If amending or adding additional Articles, enter change(s) here:

(Attach additional sheets, if necessary). (Be specific)

I am changing the name. The new name is
Ancient Herbal Care, Inc.

F. 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)

N/A

The date of each amendment(s) adoption: _____, if other than the date this document was signed.

Effective date if applicable: 3-1-15
(no more than 90 days after amendment file date)

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 ~~Shareholders~~."
(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.

Dated 3-12-15

Signature

Robin Buggs, CEO
(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)

Robin Buggs CEO

(Typed or printed name of person signing)

CEO

(Title of person signing)