P1300016880

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COVER LETTER

TO: Amendment Section

Division of Corpor	ations		
NAME OF CORPORA	ATION: Lollipop	s Kids Spa	
DOCUMENT NUMBI		146880	
	f Amendment and fee are sul	bmitted for filing.	
Please return all corresp	ondence concerning this mat	ter to the following:	
_	ارمان	Name of Contact Person	
_	<u> </u>	Firm/ Company	the state of the s
_	15817	Dela plat Address	a Lone
_	N.	City/ State and Zip Code	34110
	Porter house E-mail address: (to be us	Se 59 © Com sed for future annual report	cast net notification)
For further information	concerning this matter, pleas	se call:	
Shanna Name of	on Porter Contact Person	at (50 Z Area Co	599 · 3100 de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	urtment 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)
Amer Divis P.O. I	ng Address Idment Section ion of Corporations Box 6327 nassee, FL 32314	Amend Division Clifton	Address Iment Section on of Corporations Building executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

(Name of Corporation as currently filed with the Florida Dept. of State)		
(Document Number of Corporation (if known)		·
(Document Number of Corporation (if known)		
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following its Articles of Incorporation:	g amen	dment(s) to
A. If amending name, enter the new name of the corporation:		
Shannon Porter 2015 Inc.	Tri_	
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the al "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must of word "chartered," "professional association," or the abbreviation "P.A."	_The bbrevia contain	tion
B. Enter new principal office address, if applicable:		
(Principal office address <u>MUST BE A STREET ADDRESS</u>)		_
 		_
C. Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		_
		
D. If anothing the spiritual state of the st		_
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 Nau Pagintourd Agent		4
Name of New Registered Agent	ज	ALI SEO
(Florida street address)	. 또 -	:- 23 : - 23
	1	SAT SAT
New Registered Office Address:, Florida, Florida, Zip C	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	
(5.9)	1.	740
	3: 43	82
New Registered Agent's Signature, if changing Registered Agent:	ယ	ъ,
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	¥	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			
Add			
Remove			
2) Change			
Add		•	
Remove			
3) Change			15 15
Add			SER
Remove			-8 -8
4) Change		<u> </u>	PH 3
Add			TATE ORIDA
Remove			
5) Change			
Add		•	
Remove			
6) Change			
Add			
Remove			

f amending or adding additional Articles, enter change(s) here: Attach additional sheets, if necessary). (Be specific)		
•		

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	55	> C
	EP	- 1:-C
		
	PH	7
If an amendment provides for an exchange, reclassification, or cancellation of issued shares,	3: 4 3	Ĭ,
provisions for implementing the amendment if not contained in the amendment itself:	<u> </u>	쑴
(if not applicable, indicate N/A)	•	7
(if not applicable, material MA)		
(y not applicable, materie WA)		
(ly not applicable, matcute 1474)		
(ty not applicable, matcute 14/A)		
(ty not applicable, matcute 14/A)		
(ty not applicable, matcute 14/A)		
(ty not applicable, matcute 147A)		
(ty not applicable, matcure IVA)		
(ty not applicable, matcute 147A)		
(ty not applicable, matcute 14/A)		
(ty not applicable, matcute 14/A)		
(ty not applicable, matcure IVA)		

date this document was signed.	option:, if other than tr
Effective date if applicable:	
	(no more than 90 days after amendment file date)
Note: If the date inserted in this bl document's effective date on the Dep	ock 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 ador by the shareholders was/were suf	oted by the shareholders. The number of votes cast for the amendment(s) ficient 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 f	or the amendment(s) was/were sufficient for approval
by	n
	(voling group)
action was not required.	oted by the board of directors without shareholder action and shareholder oted by the incorporators without shareholder action and shareholder
Dated 9,12.1	PH 3: 43 Porter
selected	rector, president or other officer — if directors or officers have not been, by an incorporator — if in the hands of a receiver, trustee, or other court and fiduciary)
	Shannon Poter (Typed or printed name of person signing)
-	Owner / President (Title of person signing)