P/3000050670

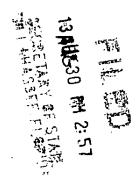
(Re	equestor's Name)	.		
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MC Enend.

9-10-13

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: POETIC AESTHETICS, INC.						
DOCUMENT NUMBER: P13000050670						
The enclosed Articles	The enclosed Articles of Amendment and fee are submitted for filing.					
Please return all correspondence concerning this matter to the following:						
	MICHAEL A. SANTORE					
		Name of Contact Person	<u> </u>			
		Firm/ Company				
	483 ORLOV RD NW					
	PALM BAY, FL 32907					
	PALIVI DAT, FL 3	City/ State and Zip Code				
201	2012kellik@gmail.com					
		ed for future annual report	notification)			
For further information concerning this matter, please call:						
MICHAEL A.	SANTORE	_{at (} 321	953-2965			
Name o	of Contact Person		de & Daytime Telephone Number			
Enclosed is a check fo	r the following amount made p	ayable to the Florida Depa	rtment 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)			
Ame Divi P.O.	ling Address endment Section sion of Corporations Box 6327 ahassee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section on of Corporations Building xecutive Center Circle ussee, FL 32301			

Articles of Amendment Articles of Incorporation of

POETIC AESTHETICS, INC

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

P13000050670	currency med with the ri	orda Dept. or State,	
	t Number of Corporation (if	known)	
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this A	Florida Profit Corporatio	on adopts the following amendm
A. <u>If amending name, enter the new na</u> LAVISH SKIN & BODY ,			ut The ne
name must be distinguishable and com "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ution "Corp," "Inc," or "(Co". A professional coi	corporated" or the abbreviation poration name must contain the
B. Enter new principal office address, (Principal office address MUST BE A S		N/A	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		N/A	
D. If amending the registered agent an			e name of the
new registered agent and/or the new	<u>v registered office address</u> KELLI K. KOLLA	=	
Name of New Registered Agent	515 N. HARBO	<u> </u>)
		eet address)	22025
New Registered Office Address:	MELBOURNE (City)	, Flo	orida 32935 (Zip Code)
New Registered Agent's Signature, if of I hereby accept the appointment of registered accept the appointment of registered accept the appointment of registered accept the appointment of the accept the appointment of the accept the appointment of the accept the acc			ations of the position.
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)

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.

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>	<u>Name</u>	<u>Addres</u> s
l) Change	Р	CHARLENE MAHR	4756 DOREEN RD
Add			COCOA
X Remove			FLORIDA 32927
2) Change	Р	KELLI K. KOLLANDA	515 N. HARBOR CITY BLVD
X Add			MELBOURNE
Remove			FLORIDA 32935
3) Change		· 	
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

The date of each amendment(s) adoption: AUGUST 25, 2013	, if other than the
ate this document was signed. AUGUST 26, 2013 Effective date if applicable:	
(no more than 90 days after amendment file date)	
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
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	
☐ 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 AUGUST 26, 2013	
Signature Whyly My	
(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)	
CHARLENE MAHR	
(Typed or printed name of person signing)	
PRESIDENT	

(Title of person signing)