## P1300051919

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION:	SARA BEAUTY (	CENTER INC		
DOCUMENT NUMBER: P1300	00057919			
The enclosed Articles of Amendm	ent and fee are sub	omitted for filing.		
Please return all correspondence c	oncerning this mat	ter to the following:		
FAISAL M	ABUFARES			
<del></del>	<del></del>	Name of Contact Persor		
SARA BEA	SARA BEAUTY CENTER INC			
	<del> </del>	Firm/ Company		
256 APOLLO BEACH BLVD.				
		Address		
APOLLO I	BEACH, FL 33572			
<u> </u>		City/ State and Zip Code	<del>, , , , , , , , , , , , , , , , , , , </del>	
TAXACT99@YA	АНОО.СОМ			
E-mai	address: (to be use	ed for future annual report	notification)	
For further information concerning	g this matter, please	e call:		
FAISAL ABUFARES		at ( <sup>813</sup>	546-7617	
Name of Contact F	erson		de & Daytime Telephone Number	
Enclosed is a check for the follow	ing amount made p	ayable to the Florida Depa	rtment of State:	
	75 Filing Fee & ificate 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 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

## Articles of Amendment to Articles of Incorporation of

	C	of	
SARA BEAUTY CENTER INC			
(Name o	of Corporation as curren	tly filed with the Florida De	ept. of State)
P13000057919			
	(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, thi	s Florida Profit Corporation	adopts the following amendment(s) to
A. If amending name, enter the new na	me of the corporation:		_
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp," "Inc," or	"Co". A professional corp	
• •		256 APOLLO BEACH	BLVD.
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		APOLLO BEACH, FL 33572	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		7856 BRISTOL PARK APOLLO BEACH, FL	
D. If amending the registered agent an new registered agent and/or the new		ss:	ame of the
Name of New Registered Agent			
	7856 BRISTOL PARK I		
	(Florida street address)		33572
New Registered Office Address:	APOLLO BEACH	(City)	, Florida
		(City)	(Lip Cour)
New Registered Agent's Signature, if c I hereby accept the appointment as regist			ons 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 <math>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	V	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	D	MAHER ALSAID	6746 MONARCH PARK DRIVE
Add			APOLLO BEACH, FL 33572
X Remove			
2) Change	D	TALAAT KANAFANI	6746 MONARCH PARK DRIVE
Add			APOLLO BEACH, FL 33572
X Remove			
3) Change	P	FAISAL M ABUFARES	7856 BRISTOL PARK DR.
X Add			APOLLO BEACH, FL 33572
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

/	s. if necessary).	cles, enter change(s) here: (Be specific)	
/A			
·····			• /
<del></del>			
If an amendment provi	ides for an exch	ange, reclassification, or cancellation of issued sh	ares,
provisions for implem	nenting the ame	ndment if not contained in the amendment itself:	
	inaicate N/A)		
/A			
<del></del>			

The date of each amendment(s) date this document was signed.	adoption:	, if other than the
Effective date <u>if applicable</u> :		
Elicettive date <u>ir applicable</u> .	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the l	s block does not meet the applicable statutory filing requirements, the Department of State's records.	nis date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were a by the shareholders was/were	idopted by the shareholders. The number of votes cast for the amendr sufficient for approval.	nent(s)
	approved by the shareholders through voting groups. The following st for each voting group entitled to vote separately on the amendment(s)	
	st for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were a action was not required.	adopted by the board of directors without shareholder action and share	holder
☐ The amendment(s) was/were a action was not required.	adopted by the incorporators without shareholder action and sharehold	er
08/18/20 Dated	015	
	favent	
Signature	a director, president or other officer – if directors or officers have not	heen
	ted, by an incorporator – if in the hands of a receiver, trustee, or othe	
	pinted fiduciary by that fiduciary)	· Court
	FAISAL M ABUFARES	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	