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(Requestor's Name)	<u>. </u>
(Address)	
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(City/State/Zip/Phone #)	
PICK-UP WAIT	MAIL
(Business Entity Name)	
(,,,,	
(Document Number)	
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SECRETARY OF TALE
TALL ARKSSED FRODRA

APR 1 5 2014 C. CARROTHERS

COVER LETTER

TO: Amendment Section Division of Corporate Co				
	RATION: Jenny Hair	And Barbershop	o Corp	
DOCUMENT NUME	_{BER:} P1000006589			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.		
Please return all corres	spondence concerning this ma	tter to the following:		
	Maria Teresa Log	oez		
		Name of Contact Person	1	
	<u> </u>	Firm/ Company		
	1172 E Vine St, k	Kissimmee, FL 3	4741	
		Address		
	Kissimmee, FL 3	4744		
		City/ State and Zip Cod	e	
Rio	mar28@aol.com			
		sed for future annual report	notification)	
For further information	n concerning this matter, pleas	se call:		
Maria Teresa	Lopez	at (407	944-4401	
Name o	of Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	ariment 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)	
Mai	ling Address	Street	Address	

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 Articles of Incorporation

The State of the S 14-APR -8 PM 3:58

Jenny Hair And Barbershop Corp

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

P1000006589

(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

	ntain the word "corporation," "company nation "Corp," "Inc," or "Co". A profe. ntion," or the abbreviation "P.A."	
. Enter new principal office address, Principal office address <u>MUST BE A S</u>		
. Enter new mailing address, if appl	icable:	
(Mailing address <u>MAY BE A POST</u>		
•		
	ıd/or registered office address in Florida w registered office address:	, enter the name of the
o. If amending the registered agent an new registered agent and/or the new Name of New Registered Agent		_
new registered agent and/or the ne-	w registered office address:	_
new registered agent and/or the ne-	w registered office address: Jose Guadalupe Cervante	s-Noriega
new registered agent and/or the ne-	Jose Guadalupe Cervantes 3315 W. Oak St, (Florida street address)	_

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

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	PT	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
1) Change	Р	Portillo-Maldonado, Ana	3315 W. Oak St
Add			Kissimmee, FL 34741
Remove			
2) Change	Р	CERUDATES - NORIEGA	2215 W. Oak St.
Add		CERUBUTES - NORIEGA	Kissimmee, fl. 34741
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			•
Add		- .	
			
Remove			

Attach additional sheets, if necessary).	cles, enter change(s) here:
	(Be specific)
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	Mary by a distribution
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If an amendment provides for an exch provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and and an annual state of the annual state of
If an amendment provides for an exch provisions for implementing the amer (if not applicable, indicate N/A)	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
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provisions for implementing the amer	ange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:
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provisions for implementing the amer	nange, reclassification, or cancellation of issued shares, and and in the amendment itself:

The date of each amendment(s) adoption: April 1	, if other than the
date this document was signed.	
Effective date if applicable: April 1	
(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"	
by" (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 March 28, 2014	
(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)	
Ana E154 POR+11/0 (Typed or printed name of person signing)	
Presidente	
(Title of person signing)	_

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