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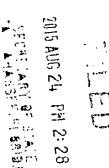
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C. CARROTHERS

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: POLO BARBERSI	HOP HAIR SALON & SP	A, INC		
DOCUMENT NUMBI					
The enclosed Articles o	f Amendment and fee are sul	bmitted for filing.			
Please return all corresp	ondence concerning this mat	ter to the following:			
١	NELSON BALLESTEROS				
_		Name of Contact Person	1		
1	NELPISERVICES INC				
_		Firm/ Company			
2	2393 S CONGRESS AVE ST	TE 223			
_		Address			
\	WEST PALM BEACH, FL 3	3406			
		City/ State and Zip Cod	e		
NELSO	On@nelpiservices.ne	T/ELSI @NELPISERVICI	ES.NET		
	E-mail address: (to be us	ed for future annual report	notification)		
For further information NELSON BALLESTE	concerning this matter, pleas	e call:at (253-6070		
Name of Contact Person		at (Area Co) de & Daytime Telephone Number		
	the following amount made		,		
■ \$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.	ing Address Indment Section Identification of Corporations IDENTIFY BOX 6327 Industrial Control of Corporations IDENTIFY BOX 6327 Industrial Control of Corporation of Corporations IDENTIFY BOX 6327 IDENTIFY BOX	Ameno Divisio Clifton 2661 E	Address Iment Section on of Corporations a Building executive Center Circle assee, FL 32301		

FILED

Articles of Amendment to Articles of Incorporation of

2015 AUG 24 PM 2: 28

POLO BARBERSHOP HAIR SALON & SPA, INC

	4.0	err 1 * * * * * * * * * * * * * * * * * *	D. A. (CA.A.)
(<u>Name</u>)	of Corporation as currently	filed with the Florida	Dept. of State)
P14000038835			
,	(Document Number of	Corporation (if known)	
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this F	Iorida Profit Corporatio	on adopts the following amendment(
A. If amending name, enter the new na	nme of the corporation:		
			The new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp," "Inc," or "C	Co". A professional coi	corporated" or the abbreviation rporation name must contain the
B. Enter new principal office address,	if applicable:		
(Principal office address <u>MUST BE A S</u>			
			
C. Enter new mailing address, if appl (Mailing address MAY BE A POST		,	
(manag and ess <u>mari buri es</u>	0.11.0B 20.11		
D. If amending the registered agent an new registered agent and/or the ne			name of the
new registered agent and/or the ne	<u>w registered office address.</u> ZULMA ALEMAN		
Name of New Registered Agent	ZULMA ALEMAN	······································	
	1201 VINING CIRCLE AF	T 1007	
	(Florida stre	et address)	
New Registered Office Address:	WELLINGTON		, Florida 33414
New Registerea Office Address.		(City)	(Zip Code)
New Registered Agent's Signature, if c	hanging Registered Agent:		
I hereby accept the appointment as regis.	tered agent.—I-am.familiar w	ith and accept the oblige	ations of the position.
($Q = \int_{-\infty}^{\infty} \int_{-\infty$		
	Signature of New Ro	egistered Agent, if chang	ging
	A 9	O O	. •

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 D	<u>oe</u>	
X Remove	<u>v</u>	Mike J	ones	
X Add	<u>sv</u>	Sally S	<u>mith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change	D		MARIA F DOMINGUEZ ALEMAN	2101 VINING CIRCLE APT 1007
X Add				WELLINGTON, FL 33414
Remove				
2) Change		_		
Add				
Remove				
3) Change				
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change				
Add				
Remove				

	onal Articles, enter cha essary). (Be specific)			
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n amendment nrowides to	r an exchange, reclassif	acation, or cancellation	1 of issued snares,	
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The date of each amendment(s) adoption:	, if other than th
date this document was signed.	
08/20/2015	
Effective date <u>if applicable</u> : (no more than 90 days after amendmen	nt file date)
Note: If the date inserted in this block does not meet the applicable statutory filing redocument's effective date on the Department of State's records.	equirements, this date will not be listed as th
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast by the shareholders was/were sufficient for approval.	for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. To must be separately provided for each voting group entitled to vote separately on the	
"The number of votes cast for the amendment(s) was/were sufficient for approv	al
by	" —·
by	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action was not required.	ction and shareholder
☐ The amendment(s) was/were adopted by the incorporators without shareholder action action was not required.	and shareholder
Dated	
(By a director, president or other officer - if directors or off selected, by an incorporator - if in the hands of a receiver, t appointed fiduciary by that fiduciary)	
ZULHA V. AleMAN.	
(Typed or printed name of person signing	3)
Vice President.	
(Title of person signing)	