## P14000031617

(R	equestor's Name)		
(A	ddress)		
(A	ddress)		
(C	ity/State/Zip/Phone	e #)	
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SECRETARY OF STATE TALLAHASSEE, FLORIDA

2018 JUL 13 PP 12:3

FILED

JUL 17 2018 T. LEMIEUX



## **COVER LETTER**

TO: Amendment Section

Division of Corporations NAME OF CORPORATION: Heace Ses Saily Beauty Salon Inc P140000 81617 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Raguel CARVATAL Firm/ Company 703 OAKment PKWY LeH: Gh Acres F6 33936 E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Raguel CA-RUATAL at (786) 897-1707
Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) **Mailing Address** Street Address Amendment Section Amendment Section

Division of Corporations

2661 Executive Center Circle Tallahassee, FL 32301

Clifton Building

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

## Articles of Amendment

to
Articles of Incorporation
of

Mercedes Sa	ily Beauty Salon Inc
(Name of Corporation as current	y filed with the Florida Dept. of State)
DIUMON 216	17
(Document Number o	f Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	on," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	Lehigh Acros Fl 33936
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	203 OAKMONT PKWY Lehigh Acres FL 33936
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address	<u>s:</u>
Name of New Registered Agent RAGE	vel CARVIATAL
Name of New Registered Agent 203 OAK no	reet address)
New Registered Office Address: Leh, 9h Ac	(City)         Florida         3393 G           (City)         (Zip Code)
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar    Lague   Lague     Signature of New 1	SS -
	10 3 <b>8</b>

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	Y	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) 🚣 Change	P	Raquel CARYATAL	203 DAK MON AKWY Lehigh Acies FL 33936
Add			Lehigh Acies 76 33936
Remove			
2) Change			
Add			
Remove			
3 ) Change			
Add			
Remove			<del></del>
4) Change		_	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add	<del></del>		
Remove			

<u>If amending</u> (Attach <i>widi</i> )	or adding additional Articles, enter change(s) here: tional sheets, if necessary). (Be specific)
(Muacii aaaa	tonal success, if necessary). The specific
<u>-</u> _	
<del>-</del> -	
<del></del>	
··	
If an amend	lment provides for an exchange, reclassification, or cancellation of issued shares,
provisions	for implementing the amendment if not contained in the amendment itself:
(if not	applicable, indicate N/A)
<del></del>	
<del>-</del>	

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendme	nt file date)
Note: If the date inserted in this block does not meet the applicable statutory filing r document's effective date on the Department of State's records.	equirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
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 approve	ral
by Meccolos Misz Alvarez (voting group)	" "
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder a 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	
Signature  (By a director, president or other officer – if directors or off selected, by an incorporator – if in the hands of a receiver, appointed fiduciary by that fiduciary)	
(Typed or printed name of person signing	2 Alvage. Z
(Title of person signing)	
(Title of person signing)	