

PRIDGES, JAMES

(Organization Use Only)

(Address)

(City/State)

(Country/Postal Code)

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Exhibit Report

Exhibit Report of Exhibit

Exhibit Report of Exhibit



600266859376

Exhibit Report of Exhibit

CONTROLLER

FD-1 Amendment to Form
Division of Corporations

SAVI OF CORPORATION, Best Cosmetic Surgery Corp
DOCUMENT NUMBER: P140000094057

The enclosed *Articles of Amendment* and Resolutions submitted for filing

Please return all correspondence concerning this matter to the following:

Nidalia Silva
Name of Contact Person
Best Cosmetic Surgery Corp
Firm's Company
8000 West Flagler ST, Suite 206
Address
Miami, FL 33144
City, State, and Zip Code

E-mail Address (Do not use for future annual report notifications)

For further information about current this matter, please call

Nidalia Silva at **786** **718-8295**
Name of Contact Person Area Code & Exchange Telephone Number

Payment of each fee for the following amount must be payable to the Florida Department of State

☐ 2015 Filing Fee	☐ 2015 Filing Fee & Certificate of Status	☐ 2015 Filing Fee & Certificate of Status	☐ 2015 Filing Fee & Certificate of Status
		(Additional copy is included)	(Additional copy is included)

Mailing Address
Vincennes, IN 47601
Division of Corporations
P.O. Box 6032
Indianapolis, IN 46201

Street Address
Vincennes, IN 47601
Division of Corporations
Circuit Building
600 E. Second St., Suite 200
Indianapolis, IN 46201

Articles of Amendment
to
Articles of Incorporation
of

Best Cosmetic Surgery Corp.

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

P14000094057

(Document Number of Corporation to be Amended)

Pursuant to the provisions of Section 607.006, Florida Statutes, the Florida Profit Corporation, adopt the following amendments to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

N/A

The new name must be clearly distinct and contain the word "corporation," "company," "incorporated," or the abbreviation "corp," "co., " "llc," or the designation "a corp," "inc.," or "llc." A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

B. Enter new principal office address, if applicable.

(Principal office address ME, ST, HI, DC, STR, FL ADDRESS)

8000 West Flagler ST
Suite 206

Miami, FL 33144

C. Enter new mailing address, if applicable.

(Mailing address ME, DC, HI, FL, ST, STR, DC, FL, DC)

8000 West Flagler ST
Suite 206

Miami, FL 33144

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent

N/A

8000 West Flagler ST, Suite 206

(If not located in Florida)

New Registered Office Address

Miami

(City)

Florida 33144

(Zip Code)

New Registered Agent's Signature of Changing Registered Agent:

The following is the appointment as a registered agent. I am familiar with and accept the obligations of the position.

(Signature of New Registered Agent if changing)

7. Planning of adding additional studies, data, or changes to the
N/A

8. Planning of procedures for the synthesis of data, data, or changes to the
N/A

The date of each amendment(s) adoption) _____
date this document was signed

at _____ by the

Executive date if applicable) _____

Adoption of Amendments)

(GIPP4-18, GSN4)

☒ The amendment(s) was/were adopted by the shareholders. The number of votes cast for this amendment of the shareholders was/were sufficient for approval.

☐ The amendment(s) was/were approved by the shareholders through voting proxy. The full text of the amendment(s) is/are to be published for a minimum of 30 days separately from the financial statements.

*The number of votes cast for the amendment(s) was/were sufficient for approval.

By _____

Signature

☐ The amendment(s) was/were adopted by the shareholders without shareholder approval and without shareholder approval.

☐ The amendment(s) was/were adopted by the shareholders without shareholder approval and without shareholder approval.

Direct _____

Signature _____

Nicholas J. Oliver

President
