P1500000 42-99

(Rec	questor's Name)			
(Add	fress)			
(Add	dress)			
(City	//State/Zip/Phone	; #)		
PICK-UP	☐ WAIT	MAIL		
(Bus	siness Entity Nan	ne)		
(Doc	cument Number)	···		
Certified Copies	Certificates	of Status		
Special Instructions to Filing Officer:				
!				

Office Use Only



100275481391

08/06/15--01009--024 **35.00



AUG 0 7 2015 C McNAIR

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORR	Gentlemen's Quart	ers Barber Shop Inc		
NAME OF CORPO	P15000004299	·		
DOCUMENT NUM	IBER:			and the
The enclosed Article	s of Amendment and fee are su	bmitted for filing.		
Please return all corr	espondence concerning this ma	tter to the following:		
	Alberto D Delgado			
		Name of Contact Person	n	
	·			
		Firm/ Company		
	11767 South Dixie Highway	Unit 354		
		Address		
	Pinecrest FL 33156			
		City/ State and Zip Cod	e	
alba	rtojr305@gmail.com			
		sed for future annual report	motification)	-
	Li-man address. (to be di	sed for future affilial report	notification)	
For further informati	on concerning this matter, pleas	se call:		
Alberto D Delgado		at (³⁰⁵	202-3411	
Name of Contact Person			de & Daytime Telephone Nu	mber
Enclosed is a check	for the following amount made	payable to the Florida Depa	artment 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)	
M	ailing Address	Street	Address	
Ar	nendment Section	Amendment Section		
	vision of Corporations	Division of Corporations		
P.O. Box 6327 Tallahassee, FL 32314		Clifton Building 2661 Executive Center Circle		

Tallahassee, FL 32301

Articles of Amendment **Articles of Incorporation**

Gentlemen's Quarters Barber Shop Inc

	_ <u> </u>
(Name of Corporation as currently filed with the Florida Dept. of	of State)
P15000004299	3 3 0
(Document Number of Corporation (if known)	6.0
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adoptits Articles of Incorporation:	pts the following angendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation," "company," or "incorporation," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	nted" or the abbreviation on name must contain the
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered office address in Florida, enter the name new registered agent and/or the new registered office address: Name of New Registered Agent	of the

New Registered Agent's Signature, if changing Registered Agent:

New Registered Office Address:

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

Signature of New Registered Agent, if changing

(Florida street address)

(City)

Florida

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	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	S/T	Maurice Perez	1336 SW 233 Street
X Add		<u> </u>	Miami Fl 33032
Remove		-	
2) Change			
Add		-	
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) he (Be specific)	·		
				
			·-	
If an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	lange, reclassification, ndment if not containe	or cancellation of issu d in the amendment it	<u>ed shares,</u> self:	

Thé date of each amendment(s) date this document was signed.	adoption:	, if other than the
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the	s block does not meet the applicable statutory filing requirements, this da Department of State's records.	te will not be listed as th
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendment(s sufficient for approval.	5)
	approved by the shareholders through voting groups. The following stateme for each voting group entitled to vote separately on the amendment(s):	ent
	ast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
	adopted by the board of directors without shareholder action and shareholder	ег
☐ The amendment(s) was/were a action was not required.	adopted by the incorporators without shareholder action and shareholder	
July 31, Dated	2015	
Dated		
Signature		
(By :	a director, president or other officer - if directors or officers have not been	
	cted, by an incorporator – if in the hands of a receiver, trustee, or other countried fiduciary by that fiduciary)	rt
арро	officed fiductary by that fiductary)	
	Alberto D Delgado	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	