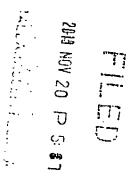


Office Use Only



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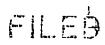
COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	MIGUEL ANGE	L STYLISTS INC		
DOCUMENT NUMBE	P15000013851			
The enclosed Articles of	Amendment and fee are su	bmitted for filing.		
Please return all correspo	ondence concerning this ma	tter to the following:		
	Miguel A Almagro			
_	<u> </u>	Name of Contact Perso	n	
Ŋ	Miguel Angel Stylists, Inc			
_		Firm/ Company		
1	0710 Wiles Rd	.		
_		Address		
C	oral Springs, FL 33076			
_		City/ State and Zip Coc	le	
info@h	nispanusaine.com			
		sed for future annual repor	notification)	
	is man address. (w of ac	To race among repor		
For further information of	concerning this matter, pleas	se call:		
Miguel A Almagro		954 at (825-1164	
Name of	Contact Person	Area Co) 625-1104 ode & Daytime Telephone Number	
Enclosed is a check for t	he following amount made	payable to the Florida Dep	artment of State:	
S35 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)	
Mailing Address			Address	
	Iment Section	Amendment Section		
	on of Corporations		on of Corporations	
	ox 6327	Clifton Building		
Tallahassee, FL 32314		2661 Executive Center Circle		

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



(Name of Corporation a	
	as currently filed with the Florida Dept. of State
P15000013851	
(Document	Number of Corporation (if known)
ursuant to the provisions of section 607.1006, Florida Sta s Articles of Incorporation:	atutes, this Florida Profit Corporation adopts the following amendment(s)
. If amending name, enter the new name of the corpo	ration:
	The new
	corporation," "company," or "incorporated" or the abbreviation 'Inc," or "Co". A professional corporation name must contain the reviation "P.A."
3. Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDRE</u>	<u></u>
	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
If amending the registered agent and/or registered agent and/or registered officers. new registered agent and/or the new registered officers.	
new registered agent and/or the new registered offi	ce address.
Name of New Registered Agent	· · · · · · · · · · · · · · · · · · ·
	(Florida street address)
	(Florida street address)

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)	<u>Title</u>	Name	<u>Addres</u> s		
1) Change	р	ELIZABETH TOBAR	12185 ROYAL PALM BLVD		
Add			CORAL SPRINGS, FL 33065		
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).	ticles, enter change(s) here: (Be specific)	
 		
		
f an amendment provides for an excl	hange, reclassification, or cancellation of issued shares,	
(if not applicable, indicate N/A)	endment if not contained in the amendment itself:	
(у погарунеаме, такие пол)		
		_

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 amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements document's effective date on the Department of State's records.	i, 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 for the ame by the shareholders was/were sufficient for approval.	ndment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following must be separately provided for each voting group entitled to vote separately on the amendment	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by"	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shaction was not required.	areholder
■ The amendment(s) was/were adopted by the incorporators without shareholder action and shareh action was not required.	older
October 10, 2018 Dated Signature	
(By a director, president or other officer – if directors or officers have r selected, by an incorporator – if in the hands of a receiver, trustee, or o appointed fiduciary by that fiduciary)	
ELIZABETH TOBAR	
(Typed or printed name of person signing)	· · ·
PRESIDENT	
(Title of person signing)	