P150000 26061

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2020

COVER LETTER

TO: Amendment Section

Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: FANIAS	1 NOUS BY DIANNA INC.			
DOCUMENT NUMBER: P 150	000 26061			
The enclosed Articles of Amendment and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
UAIC	NA GARDNER			
FANTO	Name of Contact Person SYNOUS BY DIANNA INC. Firm/ Company			
824	PRANKIN KD			
West	Palm Beach, PL. 33405			
E-mail address: (to be us	City/ State and Zip Code ARITHES @ GMAIL Com sed for future annual report notification)			
For further information concerning this matter, please call:				
DIANUA GARDNER				
Name of Contact Person Area Code & Daytime Telephone Number				
Enclosed is a check for the following amount made p	payable to the Florida Department of State:			
□ \$35 Filing Fee □ \$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & S52.50 Filing Fee Certified Copy Certificate of Status (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed)			
Mailing Address Amendment Section Division of Corporations	Street Address Amendment Section Division of Corporations			
P.O. Boy 6327	The Centre of Tallahassee			

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303



December 5, 2020

DIANNA GARDNER 826 FRANKLIN RD WEST PALM BEACH, FL 33405

SUBJECT: FANTASY NAILS BY DIANNA INC

Ref. Number: P15000026061

We have received your document for FANTASY NAILS BY DIANNA INC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 020A00024344

Rebekah White Regulatory Specialist II Supervisor

Articles of Amendment

(0	.•
Articles of Incor	poration
PANIASY NAIS by I	JANUA INC
(Name of Corporation as currently f	iled with the Florida Dept. of State)
P150000 2	.6061
(Document Number of C	orporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Flats</i> Articles of Incorporation:	orida Profit Corporation adopts the following amendment
A. If amending name, enter the new name of the corporation:	
FANTASY DESIGNS	by DIANNA INC The new
name must be distinguishable and contain the word "corporation," "con "Inc.," or Co.," or the designation "Corp," "Inc." or "Co". A p "chartered," "professional association," or the abbreviation "P.A."	
charterea, projessional association, or the appreviation v.A.	926 FOR 1612Dd
B. Enter new principal office address, if applicable:	DEG I KLINKIIVKII
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	West DAM BCh. FL.3
C. Enter new mailing address, if applicable:	
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	
D. If amending the registered agent and/or registered office addres	s in Florida, enter the name of the
new registered agent and/or the new registered office address:	
Name of New Registered Agent	1me
	•
(Florida street	address)
< (The second secon
New Registered Office Address: (C	Florida
New Registered Agent's Signature, if changing Registered Agent:	
hereby accept the appointment as registered agent. I am familiar wit	h and accept the obligations of the position.
\sim \wedge	A 6
56	MIC
Signature of New Room	istered Agent, if changing
Signature of New Nego	ore can again, it countries
Ch1. 16 18 - 1 1 .	

Check if applicable The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), F.S.

. If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, namaddress 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 = Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office 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. The 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, 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>	<u>Name</u>	Address
1) Change		_	
Add			
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

F. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
NOVE
<u></u>
<u> </u>
F. If an amendment 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)
NUVE

The date of each amendment(s) adoption: date this documers was signed.	10[15]	2020		, if other th
Effective date if applicable:	10/15/	2020	-	
	(no more than	90 days after ar	mendment file date)	
Note: If the date inserted in this block does document's effective date on the Department			filing requirements	, this date will not be listed
Adoption of Amendment(s)	CHECK ONE)			
The amendment(s) was/were adopted by taction was not required.	the incorporators, o	or board of direct	ors without sharehol	der action and shareholder
☐ The amendment(s) was/were adopted by the shareholders was/were sufficient f		The number of vo	otes cast for the ame	ndment(s)
☐ The amendment(s) was/were approved by must he separately provided for each vot				
by DIPHUA	mendment(s) was/voting group)	were sufficient fo	or approval	
Dated	5/202 m. RL	Vairly Officer - if directo	rs or officers have n	ot been
selected, by an i		the hands of a re	eceiver, trustee, or ot	
	DIANH	AL E	ARANE	R
		ed name of perso		
		esiden	et_	
	 (Title of person 	signing)		