

PI5000046976

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000276162260

*Name Changed
& Amended*

08/21/15--01015--012 **52.50

FILED
2015 OCT -6 PM 14:24
STATE OF FLORIDA
TALLAHASSEE

X00789, 00721, 01168, 00707 00505



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 25, 2015

Misty Hopkins
Dream Girls Beauty Supply
8321 NW 22nd Ave.
Miami, FL 33054

SUBJECT: 4 ON THE GO BEAUTY SUPPLY STORE INC.
Ref. Number: P15000046976

We have received your document for 4 ON THE GO BEAUTY SUPPLY STORE INC. and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Our records indicate the current name of the entity is as it appears on the enclosed computer printout. Please correct the name throughout the document.

The document you submitted has been prepared pursuant to nonprofit statutes (chapter 617, Florida Statutes). As the entity was originally filed as a corporation for profit, this document should be filed pursuant to chapter 607, Florida Statutes.

We are enclosing the proper form(s) with instructions for your convenience.

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

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.

Annette Ramsey
Regulatory Specialist II

Letter Number: 815A00017941

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: 4 on the Go Beauty Supply

DOCUMENT NUMBER: P15000046974

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Misty Hopkins / Jabaria Starks
(Name of Contact Person)

Dream Girls Beauty Supply
(Firm/ Company)

8321 NW 82nd Ave
(Address)

Miami FL 33054
(City/ State and Zip Code)

glady305@gmail.com / jabaria7@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Misty / Jabaria at 786 525 3637 / 786 506 4176
(Name of Contact Person) (Area Code) (Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

- | | | | |
|--|--|---|---|
| <input type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input checked="" type="checkbox"/> \$52.50 Filing Fee
Certificate of Status
Certified Copy
(Additional Copy is
Enclosed) |
|--|--|---|---|

Mailing Address

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment
to
Articles of Incorporation
of

FILED

4 on the GO Beauty Supply Inc

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

P15000046976

(Document Number of Corporation (if known))

2015 OCT -6 PM 4:24

STATE OF FLORIDA
TALLAHASSEE, FLORIDA

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

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

Dream Girls & Guys Beauty Supply Store Inc The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". 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 MUST BE A STREET ADDRESS)

8321 N.W. 22 AVE

Miam. FL 33147

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 of the new registered agent and/or the new registered office address:

Name of New Registered Agent

Treg Hopkins

2776 NW 131 ST

(Florida street address)

New Registered Office Address:

Opalocka

(City)

Florida

33054

(Zip Code)

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

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

Treg Hopkins

Signature of New Registered Agent, if changing

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 PT John Doe

X Remove V Mike Jones

X Add SV Sally Smith

Type of Action
(Check One)

Title

Name

Address

- 1) Change _____ Sheila Hemphill 1400 N.W. 54 St Apt 505
Add _____ Miami, Florida 33142
X Remove _____ _____
- 2) Change _____ Operryne Chandler 1232 N.W. 1st place #20
Add _____ Miami, Florida 33136
X Remove _____ _____
- 3) X Change V Misty Hopkins 2776 N.W. 131 St
Add _____ Opa locka FL 33054
Remove _____ _____
- 4) X Change T Jabovia Staten 19230 N.W. 39 Ct
Add _____ Miami, Garden FL 33055
Remove _____ _____
- 5) Change PCEO Treg Hopkins 2776 N.W. 131 St
X Add _____ Opa locka FL 33054
Remove _____ _____
- 6) Change _____ _____
Add _____ _____
Remove _____ _____

E. If amending or adding additional Articles, enter change(s) here:

(Attach additional sheets, if necessary). (Be specific)

Selling Beauty Products.

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)

The date of each amendment(s) adoption: 5-22-2015, 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, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s) (CHECK ONE)

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

The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):

"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 shareholder action was not required.

☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Dated 9-26-15

Signature Jamie Staten

(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

Jamoria Staten
(Typed or printed name of person signing)

T
(Title of person signing)