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(Do	ocument Number)		
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Special Instructions to Filing Officer:				
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	ATION: SMOOTH BODIE	S, INC.					
DOCUMENT NUMBE	P15000060211						
The enclosed Articles o	f Amendment and fee are su	bmitted for filing.					
Please return all corresp	ondence concerning this mat	tter to the following:					
I	AURA A. STREIMER						
_		Name of Contact Person	1				
S	STREIMER & FLUSBERG, PA						
_	Firm/ Company						
I	1361 SAWGRASS CORPORATE PARKWAY SUITE 100						
-		Address					
S	UNRISE, FL 33323						
_		City/ State and Zip Cod	e				
INFO@	SFCPA.NET						
	E-mail address: (to be us	ed for future annual report	notification)				
	concerning this matter, pleas) de & Daytime Telephone Number				
Name of	Contact Person	Area Co	de & Daytime Telephone Number				
Enclosed is a check for	the following amount made p	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)				
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					



15 SEP 15 AM 8: 57

Articles of Amendment to Articles of Incorporation of

SMOOTH BODIES, INC.
(Name of Corporation as currently filed with the Florida Dept. of State)
P15000069211
(Document Number of Corporation (if known)
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. Hamending name, enter the new name of the corporation:
SMOOTH BODIES AESTHETICS, INC.
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. Kapplicable: (Principal office address MUST BE A STREET ADDRESS)
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
(Florida zirret address)
New Registered Office Address:, Florida,
(City) (Zip Code)
New Registered Agent's Signature, II changing Registered Agent; 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

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, (f necessary)

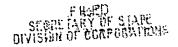
Please note the officer/director title by the first letter of the office title:

P - President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CBO = 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 Dos	
X Remove	¥	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	.Title	Name	Address
1)Change			
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
A Chausa			
6) Change			
Add			
Remove			

If amending or (Attach addition	adding additional Arti al sheets, if necessary).	eles, anter change (Be specific)	(s) here:		
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provisions for	nt provides for an each implementing the amer licable, indicate N/A)	ange, reclassifics nament if not con	ilon, or sancellation tained in the amen	n of issued shares, dment itself:	
				<u> </u>	<u> </u>
				_ 	
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	AUGUST 28, 2015	15 SEP 15	AM 8: 57	
The date of each amendment(s) ac date this document was signed.		· · · · · · · · · · · · · · · · · · ·		if other than the
Effective date <u>if applicable</u> :	(a	lays after amendmen	1.01. Jan	
	(no more inan yu a	iaya ajter amenamen	i pie date)	
Note: If the date inserted in this bedocument's effective date on the De		le statutory filing re	quirements, this date w	ill not be listed as the
Adaption of Amendment(s)	(CHECK ONE)			
The amendment(s) was/were ado by the shareholders was/were su		imber of votes cast f	or the amendment(s)	
The amendment(s) was/were app must be suparately provided for				
"The number of votes cast	or the amendment(s) was/were s	ufficient for approva	I	
by		,		
	(voting group)			
The amendment(s) was/were ado action was not required.	pted by the board of directors wi	ihout shareholder ac	tion and shareholder	
The amendment(s) was/were ado action was not required.	pted by the incorporators withou	t shareholder action :	and shareholder	
AUGUST 2	8, 2015)		
	1	/- 		
Signature (By a di	rector, president or other officer	- if directors or offic	ers have not been	
selected	, by an incorporator - if in the h			
appoint .	ed fiduciary by that fiduciary)			
	Lisa Lewis			
•	(Typed or printed nar	ne of person signing)	
	Director			
•	(Tide of	nemon simina)		