# P150000013446

(Re	questor's Name)	
(Ad	dress)	
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PICK-UP	☐ WAIT	MAIL
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#### COVER LETTER

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**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	RATION: EXCLUSIV	E BEAUTY SPA	, INC	
DOCUMENT NUMI	BER: P1500007364	6		
	of Amendment and fee are sub			
Please return all corre	spondence concerning this mat	ter to the following:		
	MARLENE CRUZ	- -		
		Name of Contact Persor	1	
	EXCLUSIVE BEA	UTY SPA, INC		
		Firm/ Company		
	5757 SW 8TH ST	SUITE 103		
		Address		
	MIAMI, FL 33144			
		City/ State and Zip Cod	e	
exc	dusivebeautyspa@	gmail.com		
	E-mail address; (to be us	ed for future annual report	notification)	
	n concerning this matter, pleas			
EXCLUSIVE	BEAUTY SPA, IN	IC <sub>at (</sub> 786	510-8878 de & Daytime Telephone Number	
Name	of Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check for	or 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)	
Ma	iling Address	Street	Address	
Am	endment Section		lment Section	
	rision of Corporations	Division of Corporations		
P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle			•	

Tallahassee, FL 32301

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Articles of Amendment Articles of Incorporation of

EVOLUCIVE	DEVITA	CDA	INIO
<b>EXCLUSIVE</b>	BEAULY	SPA.	

	Articles of Inco	rnoration			
	of			也	$\sim$
<b>EXCLUSIVE BEAUTY S</b>	PA, INC			MAN CONTRACTOR OF STATE OF STA	1
(Name of Corporation as	currently filed with the Flo	rida Dept. of Sta	ite)	Take A	, 'M'
P15000073646				74.75	3
(Documer	t Number of Corporation (if)	known)			<i>.</i> .
Pursuant to the provisions of section 607, its Articles of Incorporation.	4006, Florida Statutes, this $F$	lorida Profit Cor <sub>l</sub>	noration adopts the I	following amending	gr(s) ite
A. If amending name, enter the new na	me of the corporation:			The new	
name must be distinguishable and com "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp," "Inc," or "C	o". A profession	r "incorporated" o nal corporation nam	or the abbreviation	
B. Enter new principal office address, (Principal office address MUST BE A S	if applicable:	N/A			
C. Enter new mailing address, if appli (Mailing address MAY BE A POST		N/A			
D. If amending the registered agent ar new registered agent and/or the ne			ter the name of the		
Name of New Registered Agent	N/A				
<u></u>	N/A				
	(Florida stre	et address)	<del></del> .		
New Registered Office Address:	N/A		, Florida		
	City		(Zip C	(ode)	
New Registered Agent's Signature, if of I hereby accept the appointment as regis	hanging Registered Agent: tered agent. I am familiar w	ith and accept the	obligations of the p	oosition.	
<del></del> -					
.Si	gnature of New Registered A	дені, іј спандінд			

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:

President:  $\hat{V}^{\perp}$  Vice President; 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 Doc 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: XChange	PT	John Doe	T2'1' 11 1
X Remove	<u>V</u>	Mike Jones	Filing cancelled
X Add	<u>sv</u>	Sally Smith	due to returned check
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	VP	Margarita Diaz Tristan	10352 SW 212TH ST
Add			APT 205
Remove			CUTLER BAY, FL 33189
2) [ ] (1)			
2) Change	<u></u>		
Add			
Remove			
3) L Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add	<u></u>		
Remove			
6) Change			<del></del>
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here:	Filing cancelled
(Attach additional sheets, if necessary). (Be specific)	due to returned check
N/A	
	<u>.</u> .
F. If an amendment provides for an exchange, reclassification, or can	collation of icered chares
provisions for implementing the amendment if not contained in the	ie amendment itself:
(if not applicable, indicate $NA$ )	
N/A	
	<del></del>

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The date of each amendment	ts) adoption: 05/23/2018	, if other than the
date this document was signed.		<u> </u>
Effective date if applicable:	05/23/2018	
	(no more than 90 days after amendment file date)	<del>_</del>
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/wer by the shareholders was/we	e adopted by the shareholders. The number of votes east for the amendment(s) are sufficient for approval.	
	e approved by the shareholders through voting groups. The following statement d for each voting group entitled to vote separately on the amendment(s):	
	east for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/wer action was not required.	re adopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/wer action was not required.	e adopted by the incorporators without shareholder action and shareholder	
Dated_05/2	3/2018	
Dated	Uf e	
(H sc	by a director, president or other officer – if directors or officers have not been elected, by an incorporator – if in the hands of a receiver, trustee, or other court oppointed fiduciary by that fiduciary)	
	MARLENE CRUZ	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	_