P150000 18082

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· · ·	(City/State/Zip/Phone #)	
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	(Document Number)	
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SECRETARY OF STATE,

V SHIKEP. HAY 0.4 2020

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: NEW DESIGN UN	USEX, CORP	
	ER: P15000078082		<u> </u>
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	GUSTAVO SANCHEZ		
-		Name of Contact Persor	1
	NEW DESIGN UNISEX, CO	ORP	
-	· · ·	Firm/ Company	
	9638 SW 24 STREET		
-		Address	···-
	MIAMI, FL 33165		
-		City/ State and Zip Code	
	COLORSHINES@YAHOO.	СОМ	
•	E-mail address: (to be us	sed for future annual report	notification)
For further information	concerning this matter, pleas		
GUSTAVO SANCHE	Z	at (_) 306-1779
Name o	f Contact Person		de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ame Divis P.O.	ing Address ndment Section sion of Corporations Box 6327 thassee, FL 32314	Amend Divisio The Co 2415 N	Address ment Section n of Corporations entre of Tallahassee N. Monroe Street, Suite 810 ussee, FL 32303

Articles of Amendment Articles of Incorporation of

NEW DESIGN UNISEX, CORP

(Name of Corporation	as currently filed with the Florida Dept. of State)	
P15000078082		
(Documen	nt Number of Corporation (if known)	
Pursuant to the provisions of section 607,1006, Florida Stits Articles of Incorporation:	statutes, this Florida Profit Corporation adopts the fol	lowing amendment
A. If amending name, enter the new name of the corp	poration:	The new
name must be distinguishable and contain the word "corp "Inc.," or Co.," or the designation "Corp," "Inc." o "chartered," "professional association," or the abbrevia	or "Co". A professional corporation name must c	eviation "Corp.,"
B. Enter new principal office address, if applicable:	9638 SW 24 ST	
(Principal office address MUST BE A STREET ADDR.	MIAMI, FL 33165	
·		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	9638 SW 24 ST	
	MIAMI, FL 33165	_
		2020 SEC
D. If amending the registered agent and/or registered		020 APR 22
new registered agent and/or the new registered off	fice address:	第 2 :
Name of New Registered Agent		
		3: 09
	(Florida street address)	P
New Registered Office Address:	, Florida,	(Zip Code)
	•	•
New Registered Agent's Signature, if changing Regist I hereby accept the appointment as registered agent. I a		tion.
	tre of New Registered Agent, if changing	
Check if applicable		

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, at 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:

 $P = President; \ V = Vice \ President; \ T = Treasurer; \ S = Secretary; \ D = Director; \ TR = Trustee; \ C = Chairman or Clerk; \ CEO = Chi Executive Officer; \ CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office her President, Treasurer, Director would be PTD.$

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 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 Chang 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>	<u>Name</u>	<u>Addres</u> s
1) Change		_	
Add			
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).	icles, enter change(s) here: (Be specific)		
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f un amandment provides for an eval	nange, reclassification, or ca	ncellation of issued shares,	
i an amenument provides for all excl		the amendment itself:	
provisions for implementing the ame	ndment if not contained in	the amenument usen.	
provisions for implementing the ame	ndment if not contained in	ine amenoment usen.	
provisions for implementing the ame (if not applicable, indicate N/A)	ndment if not contained in	the amenument usen.	
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	t(s) adoption:, if other tha
date this document was signed	n. - 04/20/2020
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
	this block does not meet the applicable statutory filing requirements, this date will not be listed a the Department of State's records.
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
■ The amendment(s) was/we action was not required.	ere adopted by the incorporators, or board of directors without shareholder action and shareholder
	ere adopted by the shareholders. The number of votes cast for the amendment(s) were sufficient for approval.
	ere approved by the shareholders through voting groups. The following statement ed for each voting group entitled to vote separately on the amendment(s):
"The number of vote	s cast for the amendment(s) was/were sufficient for approval
GUSTAVO SAN	NCHEZ
o,	(voting group)
04/17 Dated	7/2020
Signature _	///wy-
s	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 ppointed tiduciary by that fiduciary)
	GUSTAVO SANCHEZ
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)