## P16000004904

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(City/State/Zip/Phone #)
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## **COVER LETTER**

TO: Amendment Section Division of Corporations 2018 MAR 28 PH 3: 28

NAME OF CORPO	DRATION: NAILBAR TOUC	H INC				
DOCUMENT NUM	P16000004904					
The enclosed Article	es of Amendment and fee are su	abmitted for filing.				
Please return all corr	respondence concerning this ma	tter to the following:				
	ADA HERNANDEZ CARM	IONA				
		Name of Contact Person	1			
	ACROSS CONNECTION INTERNATIONAL INC					
	<del></del>	Firm/ Company				
	285 EDISTO PLACE					
	***	Address	<del></del>			
	APOPKA FL 32712					
	·	City/ State and Zip Cod	2			
ACI	IBIZ101@GMAIL.COM					
, , , , , , , , , , , , , , , , , , ,	E-mail address: (to be us	sed for future annual report	notification)			
	`					
For further informati	on concerning this matter, pleas	se call:				
ADA CARMONA		407 at (	304-7693			
Name	e of Contact Person	Area Co	de & Daytime Telephone Number			
Enclosed is a check i	for the following amount made	payable to the Florida Depa	artment of State:			
./	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \					
S35 Filing Fee	\$43.75 Filing Fee & Sertificate 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			Address			
			ment Section			
Division of Corporations P.O. Box 6327		Division of Corporations Clifton Building				
Tallahassee, FL 32314		2661 Executive Center Circle				

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of



NAILBAR TOUCH INC

2018 HAR 28 PH 3: 20

(Name of Corporation as current	ly filed with the Florida Dept. of State)
P16000004904	,
(Document Number of	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) t
A. If amending name, enter the new name of the corporation:	
N/A	The new
name must be distinguishable and contain the word "corporatio "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or " word "chartered," "professional association," or the abbreviation	on," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	REMAINS THE SAME
(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 add	ress in Florida, enter the name of the
new registered agent and/or the new registered office address	<u>S:</u>
Name of New Registered Agent REMAINS THE SAME	
(Florida str	reet address)
New Registered Office Address:	, Florida
	(City) (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
/	O
$\Lambda \cap \mathcal{N}$	. () ()
yaa Wyn	and Carmona
Signature of New I	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	<u>PT</u>	John Do	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	<u>ones</u>	
X Add	<u>sv</u>	Sally Sr	<u>nith</u>	
Type of Action (Check One)	Title		Name	Address
1) X Change	P	_	TIFANNY ROMERO COLON	980 E. Osceola Parkway
Add				kissimmee, FL 34744
Remove				(NAME WAS MISPELLED)
2) Change				
Add				
Remove				W-1-7-7-7-7-7-7-7-7-7-7-7-7-7-7-7-7-7-7-
3) Change		_		
Add				
Remove				
4) Change		<del></del>		
Add				
Remove				
5) Change		_		
Remove				
6) Change		_		
Add				
Remove				

. ,	). (Be specific)	<u>re</u> :	
	A-1-17-1		
f an amendment provides for an ex provisions for implementing the a	cchange, reclassification, one mendment if not contained	r cancellation of issued in the amendment itse	<u>shares,</u> lf:
(if not applicable, indicate N/A)			
(if not applicable, indicate N/A)			
(if not applicable, indicate N/A)			
(if not applicable, indicate N/A)	,		
(if not applicable, indicate N/A)			
(if not applicable, indicate N/A)			
(if not applicable, indicate N/A)			

The date of each amendment(s) adoption: _		, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file dat	e)
Note: If the date inserted in this block does document's effective date on the Department	s not meet the applicable statutory filing requireme of State's records.	nts, this date will not be listed as the
Adoption of Amendment(s) (C	CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders was/were sufficient for	ne shareholders. The number of votes cast for the are approval.	nendment(s)
☐ The amendment(s) was/were approved by must be separately provided for each voti	the shareholders through voting groups. The following group entitled to vote separately on the amendment	ing statement ent(s):
"The number of votes cast for the an	nendment(s) was/were sufficient for approval	
by	voting group)	
(	voting group)	
☐ The amendment(s) was/were adopted by the action was not required.	ne board of directors without shareholder action and	shareholder
The amendment(s) was/were adopted by the action was not required.	he incorporators without shareholder action and shareholder	reholder
03/13/2018 Dated	- Sange T	
Signature Jum.	y Emuso Color	
(By a director, presented, by an it	resident or other officer – if directors or officers have neorporator – if in the hands of a receiver, trustee, or ary by that fiduciary)	
TIFANN	Y ROMERO COLON	
	(Typed or printed name of person signing)	
Pr	esident	
<del></del>	(Title of person signing)	