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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : DERHY FINANCIAL SERVICES LLC

Account Number : I20090000059 : (786)380-3472 Phone Fax Number : (786)320-6879

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

COR AMND/RESTATE/CORRECT OR O/D RESIGN SASON SALON INC

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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPO	RATION: SASON SALON I	NC	
DOCUMENT NUM	D16000004886		
The enclosed Article	s of Amendment and fee are su	ibmitted for filing.	
Please return all corre	espondence concerning this ma	tter to the following:	
	SHLOMI ASAYAG		
		Name of Contact Perso	n
	SASON SALON INC		
		Firm/ Company	
	2029 HARRISON ST STE 6		
		Address	
	HOLLYWOOD, FL 33020		
		City/ State and Zip Cod	e
_	E-mail address: (to be u	sed for future annual report	notification)
For further information	on concerning this matter, pleas	se call:	
BRIGITTE HERNANDEZ		at (514-4025
Name of Contact Person		Area Co	de & Daytime Telephone Number
Enclosed is a check f	or the following amount made	payable to the Florida Dept	artment of State:
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address		Street	Address

Mailing Address
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassec, PL 32314

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

Articles of Amendment to Articles of Incorporation of

SASON SALON INC	AL - 104 - 14 - 10 - A - 2 CA - A - 2
(Name of Corporation as currently filed with	the Florida Dept. of State)
16000004986	
(Document Number of Corporation	n (if known)
rursuant to the provisions of section 607.1006, Florida Statutes, this Florida Projets Articles of Incorporation:	fit Corporation adopts the following amendment
4. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation," "compai "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A pro- vord "chartered," "professional association." or the ahhreviation "P.A."	ny," or "incorporated" or the abbreviation fessional corporation name must contain the
3. Enter new principal office address, if applicable:	
Principal office address MUST BE A STREET ADDRESS)	
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 Flori	da, enter the name of the
new registered agent and/or the new registered office address:	
Name of New Registered Agent	
Name of New Registered Agent	
(Florida street address)	
New Registered Office Address:	, Florida
(City)	(Zip Code)
lew Registered Avent's Signature, if changing Registered Avent: hereby accept the appointment as registered agent. I am familiar with and acce	and the abliquetions of the presision
hereby accept the appointment as registered agent. I am familiar with and accu	ept the obtigations of the position.
	The state of the s
Signature of New Registered Ag	gent, if changing
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	Landson,
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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 Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
() Change	P	AVIHU NAHARI	19380 COLLINS AVE #1211
Add			SUNNY ISLES, FL 33160
X Remove			
2) Change			
Add			
Remove			
3)Change			
Add			
Remove			
4)Change			
Add			
Remove			
5) Change			
Add			· · ·
Remove			
6) Change	··		
Add			
Remove			

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	des for an exchange, 1	eclassification, or o	ancellation of issu	red shares.	
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The date of each amendment(s) adoption: date this document was signed.		
Effective date if applicable:		/+1/-Se/Se/
	tho more than 90 days after amendment file date)	
Note: If the date inserted in this pipek does i document's effective date on the Department of	not meet the applicable statutory filing requirements, this State's records	date will not be listed as the
Adoption of Amendment(s)	HECK ONE)	
☐ The amendment(s) was were adopted by the by the shareholders was were sufficient for	shareholders. The number of votes east for the amendmen approval	ntrs
	w shareholders through voting groups. The latterwing state e- e-group ratition to vote separately on the amendmentis:	nteg)
"The number of votes cast for the ame	ndment(s) was were sufficient for approval	
by	ting group	
☐ The amendment it was were adopted by the action was not required.	board of diverges without sometrolder action and sharero	lefs
The unundment(s) was/were adopted by the action was not required	meorporators without shareholder action and shareholder	
Dated Signature		
(By a director, pres	adent of other officer. If directors or officers have not been organized. If in the bands of a receiver, trustee, or other ces by tout fiduciary.	ын. Б
SHEOMEZ		
	(Typed or printed name of person signing)	,
PRESIDE	i.t.	
	(Lufe of person seering)	* *********