P16000026832

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SECRETARY OF STATE DIVISION OF CORPORATIONS

SEP 23 2016 C MCHAIR

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF COR	PORATION: JMA Cosmeceutic	al Solutions	
DOCUMENT N	P16000026832		
The enclosed Arti	cles of Amendment and fee are su	abmitted for filing.	
Please return all c	orrespondence concerning this ma	tter to the following:	
	ORGELINA F .GONZALEZ	2	
		Name of Contact Persor	<u> </u>
	JMA COSMECEUTICAL S	OLUTIOS	
		Firm/ Company	
	2931 SUINRISE LAKE DR	E SUITE 303 BLDG 17	
		Address	
	SUNRISE /FL 33322		
	-	City/ State and Zip Code	9
i	ordilam@hotmail.com		
	· ·	sed for future annual report	notification)
	D-man address. (to be d	sea for fature annual report	notification;
For further inform	nation concerning this matter, plea	se call:	
Orgelinba F. Gon	zalez	at (305) 9156984 de & Daytime Telephone Number
Na	ame of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a chec	ck for the following amount made	payable to the Florida Depa	artment of State:
■ \$35 Filing Fe	e \$\Bigcup \\$43.75 \text{ 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	Amend Divisio Clifton	Address Iment Section on of Corporations Building Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment

,	of	Se Carlo
JMA Cosmeceuticla Solutions		10 000
	(Name of Corporation as currently filed with the Florida Dept. of State)	12 32.50
	P11000026832	A TOP
	(Document Number of Corporation (if known)	F
Pursuant to the provisions of se	ction 607.1006, Florida Statutes, this Florida Profit Corporation adopts the foll	owing amendment(s) to

A. If amending name, enter the new na	ame of the corporation:
	The
name must be distinguishable and cont "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ntain the word "corporation," "company," or "incorporated" or the abbrevionation "Corp," "Inc," or "Co". A professional corporation name must contain
B. Enter new principal office address, (Principal office address MUST BE A ST	
C. Enter new mailing address, if appli (Mailing address MAY BE A POST of	
	nd/or registered office address in Florida, enter the name of the
D. If amending the registered agent an new registered agent and/or the new	w registered office address:
new registered agent and/or the new	w registered office address: Orgelina F.Gonzalez
new registered agent and/or the new Name of New Registered Agent	Orgelina F.Gonzalez (Florida street address)
new registered agent and/or the new	Orgelina F.Gonzalez (Florida street address)
new registered agent and/or the new Name of New Registered Agent	Orgelina F.Gonzalez (Florida street address) , Florida

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, 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.

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>	Name	<u>Addres</u> s
1) Change	PT	JORGE L LAMAZARES	2931 Sunrise Lake Dr E ASpt 303 l
Add			33322
x Remove			
2) Change	<u>v</u>	ORGELINA F GONZALEZ	2931 SUNRISE LAKE DR E APT
XAdd			333222
Remove			
3) Change	T	ALEJANDRO FUENTES OLIVA	2931 SUNRISE LAKE DR E APT
Add			33322
X Remove			
4) X Change	P	MICHAEL Y HERMADEZ M.	2931 SUNRISE LAKE DR E APT
Add			SUNRISE fL 33322
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. <u>II :</u> At	amending or adding additional Articles, enter change(s) here: tach additional sheets, if necessary). (Be specific)
(, _,	
-	
	·
. <u>If</u>	an amendment provides for an exchange, reclassification, or cancellation of issued shares,
<u>p</u>	rovisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)
	(y noi applicable, maicale IVA)
	· · · · · · · · · · · · · · · · · · ·

	09/14/2016
	t(s) adoption:, if other than t
date this document was signed	I.
	09/14/2016
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
	(no more than 90 days after amenament file date)
	this block does not meet the applicable statutory filing requirements, this date will not be listed as the Department of State's records.
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
	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 led for each voting group entitled to vote separately on the amendment(s):
"The number of vote	es cast for the amendment(s) was/were sufficient for approval
by	(voting group)
~ <u> </u>	(voting group)
action was not required.	ere adopted by the board of directors without shareholder action and shareholder ere adopted by the incorporators without shareholder action and shareholder
action was not required.	
09/14 Dated	4/2016
Signature	Oat
<u> </u>	By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
	ORGELINA F GONZALEZ
	(Typed or printed name of person signing)
	Vice President.
	(Title of person signing)