## P160000 38388

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

| NAME OF CORPOR           | RATION:  | al Esthetics, Inc.   |   |
|--------------------------|--|--|---|
| DOCUMENT NUME            | BER: P16000038386  |  |   |
| The enclosed Articles    | of Amendment and fee are su  | bmitted for filing.  |   |
| Please return all corres | spondence concerning this ma   | tter to the following:   |   |
|                          | Stephanie B. Teasley   |  |   |
|                          | 10 T T T T T T T T T T T T T T T T T T T   | Name of Contact Perso  | n   |
|                          | Professional Advantage, L  | LC   |   |
|                          |  | Firm/ Company  |   |
|                          | 12730 187th Place North  |  |   |
|                          |  | Address  |   |
|                          | Jupiter, FL 33478  |  |   |
|                          |  | City/ State and Zip Cod  | le  |
| sbt                      | easleyacct@gmail.com   |  |   |
|                          | E-mail address:  | to be used for future annua  | al report notification)   |
| For further information  | n concerning this matter, pleas  | 561  | <b>602-2718</b>   |
| Name o                   | of Contact Person  | at (<br>Area Co  | ode & Daytime Telephone Number  |
| Enclosed is a check for  | r the following amount made  | payable to the Florida Dep   | 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)        |
| Ame<br>Divi<br>P.O.      | ling Address<br>endment Section<br>sion of Corporations<br>Box 6327<br>ahassee, FL 32314 | Ameno<br>Divisio<br>Cliftor<br>2661 F                              | Address  Iment Section on of Corporations on Building Executive Center Circle assee, FL 32301 |

## Articles of Amendment to Articles of Incorporation of

| (Name of Corporation as currently filed with the Florida Dept. of State)  P16000038386  (Document Number of Corporation (if known)  Pursuant to the provisions of section 607.1006, Florida Statutes, this corporation adopts the following amendment(s) to its Articles of Incorporation:  A. If amending name, enter the new name of the corporation:  The new2 name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co.," A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."  B. Enter new principal office address, if applicable: (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 address in Florida, enter the name of the new registered agent and/or the new registered office address:  Name of New Registered Agent  (Florida street address)  New Registered Office Address: (City) (Zip Code)  New Registered Agent's Signature, if changing Registered Agent:  I hereby accept the appointment as registered agent. 1 am familiar with and accept the obligations of the position. | Luminous Medical Esthetics, Inc.                        |   |                 |             |
|--|---|---|-----------------|-------------|
| (Document Number of Corporation (if known)  Pursuant to the provisions of section 607.1006, Florida Statutes, this corporation adopts the following amendment(s) to its Articles of incorporation:  A. If amending name, enter the new name of the corporation:  The new2  name must be distinguishable and contain the word "corporation." "company." or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."  B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)  C. Enter new mailing address MAY BE A POST OFFICE BOX)  D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:  Name of New Registered Agent  (Florida street address)  New Registered Office Address:  (City)  (Zip Code)  New Registered Agent's Signature, if changing Registered Agent:   |   | led with the Florida Dept. of State)                  |                 |             |
| Pursuant to the provisions of section 607.1006, Florida Statutes, this corporation adopts the following amendment(s) to its Articles of incorporation:  A. If amending name, enter the new name of the corporation:  The new2 name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."  B. Enter new principal office address, if applicable; (Principal office address MUST BE A STREET ADDRESS)  C. Enter new mailing address MAY BE A POST OFFICE BOX)  D. If amending the registered agent and/or registered office address:  Name of New Registered Agent  (Florida street address)  New Registered Office Address:  (City) (Zip Code)  New Registered Agent's Signature, if changing Registered Agent:   |   | Corporation (if known)                                | <del></del>     |             |
| The new?  name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."  B. Enter new principal office address, if applicable: (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 address in Florida, enter the name of the new registered agent and/or the new registered office address:  Name of New Registered Agent  (Florida street address)  New Registered Office Address:  (City)  (Zip Code)  New Registered Agent's Signature, if changing Registered Agent:  | Pursuant to the provisions of section 607.1006, Florida | • • •   | nt(s) to its    | Articles of |
| name must be distinguishable and contain the word "corporation." "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or Co.," A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."  B. Enter new principal office address, if applicable: (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 address in Florida, enter the name of the new registered agent and/or the new registered office address:  Name of New Registered Agent  (Florida street address)  New Registered Office Address:  (City)  New Registered Agent's Signature, if changing Registered Agent:   | A. If amending name, enter the new name of the co       | rporation:  |                 |             |
| name must be distinguishable and contain the word "corporation." "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or Co.," A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."  B. Enter new principal office address, if applicable: (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 address in Florida, enter the name of the new registered agent and/or the new registered office address:  Name of New Registered Agent  (Florida street address)  New Registered Office Address: (City) (Zip Code)  |   | ·   | The             | neWi        |
| B. Enter new principal office address, if applicable: (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 address in Florida, enter the name of the new registered agent and/or the new registered office address:  Name of New Registered Agent  (Florida street address)  New Registered Office Address: (City) (Zip Code)  | "Corp.," "Inc.," or Co.," or the designation "Corp,     | " "Inc," or "Co". A professional corporation name mus | abbrevia        | tion        |
| 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 address in Florida, enter the name of the new registered agent and/or the new registered office address:  Name of New Registered Agent  (Florida street address)  New Registered Office Address:  (City)  (Zip Code)  New Registered Agent's Signature, if changing Registered Agent:  |   |   | 67.77<br>C41.77 | <u>.</u>    |
| D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:  Name of New Registered Agent  (Florida street address)  New Registered Office Address:  (City) (Zip Code)  New Registered Agent's Signature, if changing Registered Agent:  |   |   | — H <u> </u>    | £. :        |
| D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:  Name of New Registered Agent  (Florida street address)  New Registered Office Address:  (City) (Zip Code)  New Registered Agent's Signature, if changing Registered Agent:  |   | ····  |                 | 7: 00       |
| Name of New Registered Agent  (Florida street address)  New Registered Office Address:  (City)  New Registered Agent's Signature, if changing Registered Agent:  |   | <u> </u>  | <u> </u>        |             |
| Name of New Registered Agent  (Florida street address)  New Registered Office Address:  (City)  New Registered Agent's Signature, if changing Registered Agent:  |   | <del></del>   | _               |             |
| Name of New Registered Agent  (Florida street address)  New Registered Office Address:  (City)  New Registered Agent's Signature, if changing Registered Agent:  |   |   |                 |             |
| (Florida street address)  New Registered Office Address:   |   |   |                 |             |
| New Registered Office Address: , Florida (City) (Zip Code)  New Registered Agent's Signature, if changing Registered Agent:  | Name of New Registered Agent                            |   |                 |             |
| (City) (Zip Code)  New Registered Agent's Signature, if changing Registered Agent:   |   | (Florida street address)                              |                 |             |
| (City) (Zip Code)  New Registered Agent's Signature, if changing Registered Agent:   | New Registered Office Address                           | Florida   |                 |             |
|  | <u> </u>  | · · · · · · · · · · · · · · · · · · ·                 | ·)              |             |
|  |   |   |                 |             |
|  |   |   | 1.              |             |
| Signature of New Registered Agent, if changing   | Signature of Ne   | ow 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)

Example:

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<br>(Check One) | Title     | <u>Name</u>     | <u>Addres</u> s        |
| l)Change                      | <u>v</u>  | Mohamed M'Rabet | 8327 Man O War Road    |
| Add                           |           |                 | Palm Beach Gardens, FL |
| X Remove                      |           |                 | 33418                  |
| 2) Change                     |           |                 |                        |
| Add                           |           |                 |                        |
| Remove                        |           |                 |                        |
| 3 ) Change                    |           |                 |                        |
| Add                           |           |                 |                        |
| Remove                        |           |                 |                        |
| 4)Change                      |           |                 |                        |
| Add                           |           |                 |                        |
| Remove                        |           |                 |                        |
| 5) Change                     |           |                 |                        |
| Add                           |           |                 |                        |
| Remove                        |           |                 |                        |
| 6)Change                      |           |                 |                        |
| Add                           |           | <u> </u>        |                        |
| Remove                        |           |                 |                        |

| 3.   | If amending or adding additional Artic        | les, enter change(s) here:   |
|------|---|--|
|      | (Attach additional sheets, if necessary).     | (Be specific)  |
| N/A  |   |  |
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| Н.   | <u>lf an amendment provides for an exchan</u> | ge, reclassification, or cancellation of issued shares,  |
|      | (if not applicable, indicate N/A)             | ment if not contained in the amendment itself:   |
| N/A  |   |  |
| 14// |   |  |
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| The date of each amendment(s) ad date this document was signed.      | option:   | , if other than th |
|--|---|--------------------|
| Effective date <u>if applicable</u> :                                |   |                    |
|  | (no more than 90 days after amendment file date)  |                    |
| Adoption of Amendment(s)   | (CHECK ONE)   |                    |
| ■ The amendment(s) was/were adop<br>by the shareholders was/were suf | oted by the shareholders. The number of votes cast for the amendment(s) ficient for approval.   |                    |
|  | oved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):                |                    |
| "The number of votes cast f  | or the amendment(s) was/were sufficient for approval  |                    |
| by   | (voting group)  |                    |
|  | (voting group)  |                    |
| ☐ The amendment(s) was/were adopt action was not required.           | sted by the board of directors without shareholder action and shareholder   |                    |
| ☐ The amendment(s) was/were adopt action was not required.           | oted by the incorporators without shareholder action and shareholder  |                    |
| Dated 10   | 30-14   |                    |
|  | rector, president or other officer – if directors or officers have not been , by an incorporator – if in the hands of a receiver, trustee, or other court |                    |
|  | ed fiduciary by that fiduciary)   |                    |
|  | Jonelle S. Meissner   |                    |
| -  | (Typed or printed name of person signing)   | <del></del>        |
|  | President   |                    |
| -  | (Title of person signing)   |                    |