P16000043013

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C. BRUMBLEY

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: BEES BEAUTY W	VORLD INC	<u></u>
DOCUMENT NUM	P16000043013		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	DEBORAH ORTEGA		
		Name of Contact Persor	1
	BEES BEAUTY WORLD IN	IC	
		Firm/ Company	
	3425 NW 81 TERRACE		
	 -	Address	
	MIAMI, FL 33147		
		City/ State and Zip Code	e
	ortega.dcb12@gmail.com		
		sed for future annual report	notification)
For further information	n concerning this matter, pleas	se call:	\$37- 664 1
	CC	at (de & Daytime Telephone Number
Name	of Contact Person	Area Co	de & Daytime i elephone Number
Enclosed is a check for	r the following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fee	S43.75 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)
Am Div P.O	ding Address endment Section sion of Corporations Box 6327 ahassee, FL 32314	Amend Divisio The Co	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

BEES BEAUTY WORLD INC	
(Name of Corporation as cu	irrently filed with the Florida Dept. of State)
P16000043013	
(Document Nur	mber of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statute its Articles of Incorporation:	es, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporati	ion:
COCCOLALA SPA BAR INC	The new
"Inc.," or Co.," or the designation "Corp," "Inc," or "C "chartered," "professional association," or the abbreviation	on," "company," or "incorporated" or the abbreviation "Corp.," Lo". A professional corporation name must contain the word "P.A."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS))
	202
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	70 T
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ac	
Name of New Registered Agent	
(Flo	rida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fan	Agent:
i nereoy accepi ine appoiniment as registerea agent. Tam jan	ишат жин ана ассерт те отванот ој те posmon.
Signature of a	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, 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 Doc	<u></u>	
X Remove	<u>V</u>	Mike Jon	nes	
X Add	<u>sv</u>	Sally Sm	<u>ith</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	Address
1) Change				
Add				
Remove				
2) Change				
Add				
Remove 3) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change		<u> </u>		
Add				
Remove				·
6) Change				
Add				
Remove				

(Atta	nending or adding additional Articles, enter change(s) here: ch additional sheets, if necessary). (Be specific)
-	
lf an	amendment provides for an exchange, reclassification, or cancellation of issued shares,
pro	visions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)
Ά	
· -	

. . .

11/06/2021	16 July 11 July 11
The date of each amendment(s) adoption:	, if other than th
date this document was signed.	
11/06/2021	
Effective date if applicable: (no more than 90 days after amendment file date)
Note: If the date inserted in this block does not meet the applicable statutory filing requirement document's effective date on the Department of State's records.	its, this date will not be listed as th
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board of directors without sharehaction was not required.	nolder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the an by the shareholders was/were sufficient for approval.	nendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following must be separately provided for each voting group entitled to vote separately on the amendment.	ng statement nt(s):
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by"	
(voting group)	
11/06/2021	
Signature Silly Heca	
(By a director, president or other officer - if directors or officers have	
selected, by an incorporator – if in the hands of a receiver, trustee, or	other court
appointed fiduciary by that fiduciary)	
DEBORAH ORTEGA	
(Typed or printed name of person signing)	<u> </u>
PRESIDENT	
(Title of person signing)	