## PWW 534/4

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## <u>COVÉR LETTER</u>

TO: Amendment Section
Division of Corporations

NAME OF CORPO	RATION: M.B.C HAIR EX	TENSIONS BY MARITZA <del></del>	INC
	BER:	P16000053414	
The enclosed Articles	of Amendment and fee are su	abmitted for filing.	
lease return all corre	spondence concerning this ma	itter to the following:	
	ANGEL L CORCINO		
		Name of Contact Person	n
	ALC ACCOUNTING SERV	'ICES	
		Firm/ Company	
	1530 BROKEN OAK DR	, ,	
		Address	·
	WINTER GARDEN FL 347	87	
		City/ State and Zip Cod	<u> </u>
,		,	
alcoi	rcino@yahoo.com	1.5. 6.	
	E-mail address: (to be u	sed for future annual report	notification)
or further information	on concerning this matter, plea	se call:	
ANGEL I. CORCINO		at (	) <u>218 - 9795</u> )
Name	of Contact Person	Area Co	de & Daytime Telephone Number
nclosed is a check fo	or the following amount made	payable to the Florida Depa	irtment of State:
3 \$35 Filing Fee	■S43.75 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)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, F1, 32314			<u>Address</u>
			lment Section in of Corporations
			m or Corporations Building
		2661 Executive Center Circle	

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

M B C HAIR EXTENSION BY MARITZA INC	
(Name of Corporation as currently	y filed with the Florida Dept. of State)
P 16000053414	
(Document Number o	f 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) to
A. If amending name, enter the new name of the corporation:	
MBC SALON BY MARITZA INC	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	n," "company," or "incorporated" or the abbreviation Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	213 WEST DONEGAN AVE
(Principal office address MUST BE A STREET ADDRESS)	KISSIMMEE FL 34741
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 addinew registered agent and/or the new registered office address	
Name of New Registered Agent	
(Florida str	vet address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agents I hereby accept the appointment as registered agent. I am familiar v	
Signature of New R	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 Doe	
X Remove	<u>V</u>	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
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		n. <u>u.</u>	
Remove			
51 Change			
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Art (Attach additional sheets, if necessary).			
, ,			
	<del>-</del>	<del>.</del>	
	<u></u>		
	<u></u>		
			<del></del>
f an amendment provides for an excl	nange, reclassification, or	cancellation of issued	shares.
provisions for implementing the ame	ndment if not contained	in the amendment itself	<u>f:</u>
(if not applicable, indicate N/A)			
			_
		<del></del>	<u> </u>

The date of each amendment(s) a date this document was signed.	doption:	if other than the
_		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the De	block does not meet the applicable statutory filing requirements, this date epartment of State's records.	will not be fisted as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were adby the shareholders was/were st	opted by the shareholders. The number of votes cast for the amendment(s) ifficient for approval.	
	proved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	t
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
*	(voting group)	
☐ The amendment(s) was/were adaction was not required.	opted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were addaction was not required.	opted by the incorporators without shareholder action and shareholder	
08/03/201 Dated	irector, president or other officer – if directors or officers have not been	
selecte	d, by an incorporator – if in the hands of a receiver, trustee, or other court ted fiduciary by that fiduciary)	
	MARITZA BERRIOS COLON	
	(Typed or printed name of person signing)	<del></del>
	PRESIDENT ( )	
	//Title of person signing)	

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