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COVER LETTER

TO: Amendment Sec Division of Cor				
NAME OF CORPO	PAULINA'S BOD	Y SHOP CORP.		
DOCUMENT NUM	P16000055087			
The enclosed Article	s of Amendment and fee are st	ibmitted for filing.		
Please return all corr	espondence concerning this ma	itter to the following:		
	FELIX MONZON			
		Name of Contact Person		
	PAULINA'S BODY SHOP CORP.			
		Firm/ Company		
	10134 NW 80 AVE			
		Address		
	HIALEAH GARDENS, FL.	33016		
		City/ State and Zip Cod	e	
PAU	JLINASBODYSHOP2018@Y	АНОО.СОМ		
	E-mail address: (to be us	sed for future annual report	notification)	
For further information	on concerning this matter, pleas	se call;		
DANILO MONZON		at (333-7328	
Name of Contact Person		Area Co	de & Daytime Telephone Number	
Enclosed is a check f	or the following amount made	payable to the Florida Depa	irtment of State:	
S35 Filing Fee	■\$43.75 Filing Fee & Certificate of Status	☐S43.75 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		Street Address Amendment Section		

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Street Address
Amendment Section Division of Corporations Clitton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

PAULINA'S BODY SHOP CORP.

,	tly filed with the Florida Dept. of State)	
P16000055087		
(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607,1006, Florida Statutes, thits Articles of Incorporation:	s Florida Profit Corporation adopts the follow	ing amendment(s
A. If amending name, enter the new name of the corporation:		
N/A		The new
name must be distinguishable and contain the word "corporati "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name mus	abbreviation
B. Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS)	N/A	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	
D. If amending the registered agent and/or registered office adenew registered agent and/or the new registered office address		18 E
Name of New Registered Agent N/A		
		_
(Florida s	irreet address)	
		<u> </u>
New Registered Office Address:	Florida	

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>\$V</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s	
1) Change	<u>v</u>	YONIFER DIAZ MILAN	12625 SW 43RD STREET	
XAdd			MIAMI, FL 33175-4217	
Remove				
2) Change				
Add				
Remove				
3) Change		- <u> </u>		
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	E. If amending or adding additional Arti (Attach additional sheets, if necessary).	(Be specific)	erst here.			
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)		. , ,				
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11/13/2019	
The date of each amendment(s) adoption:date this document was signed.	, if other than the
Effective date if applicable:	
(no more than 9t) do	ays after amendment file date)
Note: If the date inserted in this block does not meet the applicable document's effective date on the Department of State's records.	e statutory filing requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
■ The amendment(s) was/were adopted by the shareholders. The nu by the shareholders was/were sufficient for approval.	mber of votes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through must be separately provided for each voting group entitled to vote	n voting groups. The following statement separately on the amendment(s):
"The number of votes cast for the amendment(s) was/were st	ifficient for approval
(by) FELIX MONZON -PRESIDENT AND OWNER TO(it down "
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors wit action was not required.	hout shareholder action and shareholder
☐ The amendment(s) was/were adopted by the incorporators without action was not required.	shareholder action and shareholder
11/13/2019	
Signature) to V Longar	_
(By a director, president or other officer-	
selected, by an incorporator – if in the ha appointed fiduciary by that fiduciary)	nds of a receiver, trustee, or other court
FELIX MONZON	
(Typed or printed nam	e of person signing)
PRESIDENT/BUSINESS OWN	ER
(Title of p	erson signing)