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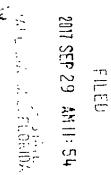
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C. GOLDEN 0CT -2 2017

COVER LETTER

TO: Amendment Section

Division of Corporations

NAME OF CORPORATION	ns. VA.	16 <	NAI &STYCIN	6	(URPOBATION)
DOCUMENT NUMBER:					(00)
The enclosed Articles of Am					
Please return all corresponde	ence concerning this ma	atter to the	following:		
	VANZE	55 <u>/</u>	REVI	\leq	- CORP.
		Name	of Contact Person		
	VANE'S	HAI	2STYL	INE	o Conf.
		Fir	m/ Company		_
	8782 S	w	8st 9	su'/	121 10
			Address		
	MAIMI F	-(33174		
		City/ S	ate and Zip Code		
<i>U</i> .	4 ne 1971 883 (E-mail address: (to be u	Sect for fun	chov. Es,	notificat	ion)
For further information conc	erning this matter, pleas	se call:			
VANESSA	REVES	-	at (786	_)	8637644 vtime Telephone Number
Name of Con	tact Person		Area Cod	le & Da	ytime Telephone Number
Enclosed is a check for the f	ollowing amount made	payable to	the Florida Depar	rtment o	f State:
\$35 Filing Fee	3\$43.75 Filing Fee & Certificate of Status	Certif	5 Filing Fee & ied Copy ional copy is sed)	Cert Cert (Ad	.50 Filing Fee dificate of Status dified Copy ditional Copy nclosed)
Mailing A	ddress		Street A	Address	
Amendment Section			Amendment Section		
Division of Corporations			Division of Corporations		
P.O. Box 6327 Taltahassee, FL 32314			Clifton I	•	g Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

FILED

of 2017 SEP 29 AM II: 54

	2011 SET 2.3 AII II.
VANE'S HATR STAILFNG	CORP
(Name of Corporation as currently t	filed with the Florida Dept. of State)
P16000058567	<u> </u>
(Document Number of C	orporation (if known)
tursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida</i> Statutes, the statutes of the statu	orida Profit Corporation adopts the following amendment(s) to
. If amending name, enter the new name of the corporation:	
VANE'S HAIRSTYLING CORP	The new
ame must be distinguishable and contain the word "corporation," Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co ord "chartered," "professional association," or the abbreviation "P.	"company," or "incorporated" or the abbreviation ". A professional corporation name must contain the
Enter new principal office address, if applicable:	8782 SW 8TH ST
Principal office address <u>MUST BE A STREET ADDRESS</u>)	UNIT 21
	MJANJ, FL 33174
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	8782 SW 8TH ST
	UN=T 21
	METRICI, FL 33174
. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:	s in Florida, enter the name of the
Name of New Registered Agent	
(Florida street	address)
New Registered Office Address:	
(C	ity) (Zip Code)
New Registered Office Address:	ity) . Florida (Zip Code)
Signature of New Reg	istered 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> <u>Joh</u>	n Doe	
X Remove	<u>V</u> <u>Mik</u>	ce Jones	
X Add	<u>SV</u> <u>Sall</u>	ly Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	<u> 175</u>	EDUARDO A. LARCIA	1732 SW 104 PL
X Add			MEANT, FL 33169
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			<u>.</u> .
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
	·
	
f an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
provisions for implementing the ame (if not applicable, indicate N/A)	endment if not contained in the amendment itself:

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	
Effective date <u>if applicable</u> : (no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date vidocument's effective date on the Department of State's records.	vill not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes east for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated SEPTEMBER 25, 2017 Signature 15000-1500	
(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)	
VANESSA M REYES	
(Typed or printed name of person signing)	
PRESTOENT	
(Title of person signing)	-