P17000011779

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COVER LETTER

Division of Corporations						
NAME OF CORPORATION: HAIR by Shlee, Inc. P170000 11779						
DOCUMENT NUMBER: P170000 11779						
The enclosed Articles of Amendment and fee are submitted for filing.						
Please return all correspondence concerning this matter to the following:						
Achley Malcolm						
Name of Contact Person						
Firm/ Company						
11859 174m Cart N						
Jater FL 33478						
City/ State and Zip Code						
E-mail address: (to be used for future annual report notification)						
E-mail address: (to be used for future annual report notification)						
For further information concerning this matter, please call:						
Achley Malcolm Name of Contact Person Area Code & Daytime Telephone Number						
Name of Contact Person Area Code & Daytime Telephone Number						
Enclosed is a check for the following amount made payable to the Florida Department of State:						
\$35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed) Certified Copy (Additional Copy is enclosed)						
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301						

Articles of Amendment to

Articles of Incorporation (Name of Corporation currently filed with the Florida Dept. of State) (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006. Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: 410 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: 121V (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: MAKColm Name of New Registered Agent (Florida street address) New Registered Office Address (City)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New 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.

X Change	1°T John Doe	
X Remove	<u>V</u> <u>Mike Jones</u>	
X Add	SV Sally Smith	
Type of Action (Check One)	<u>Title</u> <u>Name</u>	Address
I) X Change	P Ashley J. MAKOlm	
Add	·	201455 HT 33715
Remove		
2) Change		
Add		
Remove		
3) Change		
Add		
Remove		
4) Change		
Add		## 1 Part
Remove		
5) Change		
Add		
Remove		
6) Change		
Add		
Remove		

ch additional sheets, if necessary). (Be sp	ter change(s) here: ecific)			
	1/2	·		
MARRIED - NAME	es Asex	<u>.</u>	officer	6
Q	es Asent	· ,		
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amendment provides for an exchange, revisions for implementing the amendment	classification, or cance if not contained in the	llation of i	ssued shares, t itself:	
emendment provides for an exchange, revisions for implementing the amendment (if not applicable, indicate N/A)	eclassification, or cance if not contained in the	Hation of i	ssued shares, t itself:	
visions for implementing the amendment	eclassification, or cance if not contained in the	Hation of i	ssued shares. t itself:	·*··*
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visions for implementing the amendment	eclassification, or cance if not contained in the	Hation of i	sued shares.	
sions for implementing the amendment	eclassification, or cance if not contained in the	Hation of i	sued shares.	

The date of each amendment(s) adoption:	4/05/		, if other than the
date this document was signed. Effective date if applicable:	4105100		
	(no more than 90 days a	fter amendment file date)	
Note: If the date inserted in this block does document's effective date on the Department o		tutory filing requirements, thi	is date will not be listed as the
Adoption of Amendment(s) (CI	HECK ONE)		
The amendment(s) was/were adopted by the by the shareholders was/were sufficient for	e shareholders. The number approval.	of votes cast for the amendm	ent(s)
☐ The amendment(s) was/were approved by the must be separately provided for each voting			lement
"The number of votes cast for the ame	ndment(s) was/were suffici	ent for approval	
by		"	
(vo	ting group)		
☐ The amendment(s) was/were adopted by the action was not required.	board of directors without	shareholder action and shareh	oolder
☐ The amendment(s) was/were adopted by the action was not required.	e incorporators without shar	eholder action and shareholde	π
Dated4135/	17		
Signature			
(By a director, pre-		irectors or officers have not be	
	orporator — if in the hands or y by that fiduciary)	of a receiver, trustee, or other	court
A	shley J. 1	MAICOIM	
of the second se	(Typed or printed name of	person signing)	
	Pres		
	(Title of persor	signing)	