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(Cit	y/State/Zip/Phon	e #)
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(Bu	siness Entity Nar	me)
(Do	cument Number))
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	ATION: SJL BRAIDS INC				
DOCUMENT NUMBI	er: P1700	00 3719			
The enclosed Articles of	f Amendment and fee are sul	omitted for filing.			
Please return all corresp	ondence concerning this mat	ter to the following:			
S	STEPHANIE JOHNSON				
	Name of Contact Person				
, S	SLJ BRAIDS INC				
_		Firm/ Company			
4	01 N. ROSEMARY AVENU	JE, SUITE #3			
_	Address				
\	VEST PALM BEACH, FLO	RIDA 33401			
		City/ State and Zip Code			
PHBD.	SJ@gmail.com				
		ed for future annual report	notification)		
For further information	concerning this matter, pleas	e call:			
STEPHANIE JOHNSON		at (_)		
Name of Contact Person		Area Co	de & Daytime Telephone Number		
Enclosed is a check for	the following amount made p	payable to the Florida Depa	rtment of State:		
\$35 Filing Fee	□\$43.75 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)		
Amen Divisi P.O. E	ng Address dment Section on of Corporations Box 6327 nassee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle assee, FL 32301		

Articles of Amendment to Articles of Incorporation of

17 APR 28 PH 3: 15

	. 7
(Name of Corporation as curren	ntly filed with the Florida Dept. of State)
W/7 000 0 37	191
(Document Number	r of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, the ts Articles of Incorporation:	is Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporation:	
SLJ BRAIDS INC	The new
name must be distinguishable and contain the word "corporat "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	tion," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the
3. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	P/A
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 ad new registered agent and/or the new registered office addresses.	
Name of New Registered Agent	N/A
(Florida	street address)
(Florida . New Registered Office Address:	street 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 <math>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)	Title	<u>Name</u>	<u>Addres</u> s
1) Change			- · · · · · · · · · · · · · · · · · · ·
Add		•	
Remove		μ	
2) Change			
Add		171	
Remove			
3) Change	 		
Add			
Remove			
4) Change			
Add			
Remove			
5) Change	 		
Add			
Remove			.
6) Change			
Add			
Remove			

	or adding additional Articl onal sheets, if necessary).		<u>here</u> :		
				101 103 1 111 1 201 12 121	
		N/A			
		1A			
					<u>.</u>
•	- '				
				<u> </u>	
				<u> </u>	·
f an amendi	nent provides for an excha	nge, reclassification	or cancellation of	issued shares,	
	or implementing the ameno opplicable, indicate N/A)	<u>dment if not contain</u>	ed in the amendme	ent itself:	
		•			
		12/	·		
		DIA		···	
		///			
			<u> </u>		

	APRIL 24, 2017	10 1 1
The date of each amendment(s) date this document was signed.	adoption:	, if other than the
	PRIL 24, 2017	
<u></u> .	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the I	block does not meet the applicable statutory filing requirements, this date with Department of State's records.	ll not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were as by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
	oproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):	
	t for the amendment(s) was/were sufficient for approval	
by	(voting group)	
,	(voting group)	
☐ The amendment(s) was/were action was not required.	dopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were action was not required.	dopted by the incorporators without shareholder action and shareholder	
04/24/20 Dated	7	
Signature	5 20hrson	
(By a select	director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court nted fiduciary by that fiduciary)	_
	STEPHANIE JOHNSON	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	