P17000042292

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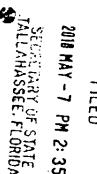
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C. GOLDENMAY - 8 2018

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: BETWEEN THE B	RUSHES ON LINE, INC		
DOCUMENT NUM	P17000042292			
The enclosed Articles	s of Amendment and fee are sul	bmitted for filing.		
Please return all corre	espondence concerning this mat	ter to the following:		
	LINDA ZIGLAR			
		Name of Contact Person	1	
	BETWEEN THE BRUSHES	ONLINE, INC		
		Firm/ Company	-	
	709 MAIN STREET			
		Address		
	WINDERMERE, FLORIDA.	. 34786		
		City/ State and Zip Code	2	
h	veenthebrushesonline@gmail.co	ou n		
——————————————————————————————————————		sed for future annual report	notification)	
	Danian address, (10 oc d.	sed for imale annual report	,	
For further informati	on concerning this matter, pleas	se call:		
Linda Ziglar		407 at (7165795 de & Daytime Telephone Number	
Name of Contact Person		Area Co	de & Daytime Telephone Number	
Enclosed is a check	for the following amount made	payable to the Florida Depa	artment 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)	
Ai Di	ailing Address mendment Section ivision of Corporations O. Box 6327	Ameno Divisio	Address Iment Section on of Corporations a Building	
P.O. Box 6327 Tallahassee, FL 32314		2661 Executive Center Circle		

Tallahassee, FL 32301

Tallahassee, FL 32314



April 25, 2018

LINDA ZIGLAR 709 MAIN STREET WINDERMERE, FL 34786

SUBJECT: BETWEEN THE BRUSHES ON LINE, INC.

Ref. Number: P17000042292

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The date of adoption of each amendment must be included in the document.

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Claretha Golden Regulatory Specialist II

Letter Number: 518A00008504



Articles of Amendment to Articles of Incorporation of

FILED 2018 MAY - 7 PM 2: 35

BETWEEN THE BRUSHES ON LINE, INC

(Name of Corporation as current	Iv filed with the Florida Dept. of State PECRE TARY OF STATE
P17000042292	STEENHASSEE. FLORID
(Document Number of	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this is Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
BETWEEN THE BRUSHES ONLINE, 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	"Co". A professional corporation name must contain the
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
(Mutting dutiess <u>man bit A 1 051 Q1 11 011 gail</u>)	
D. If amending the registered agent and/or registered office ad-	dress in Florida, enter the name of the
new registered agent and/or the new registered office addre	<u>ss:</u>
Name of New Registered Agent N/A	
(Florida s	treet address)
New Registered Office Address:	, Florida
New Registered Office Hadress.	(City) (Zip Code)
New Regimeral Office Mureus	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Ager	nt:
I hereby accept the appointment as registered agent. I am familia.	r with and accept the obligations of the position.
1/	
N/A	7
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.

Example: X Change	PT	John Doc	
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>	<u>Addres</u> s
1) Change	P,D	SPENCER, CONSTANCE	709 MAIN STREET
Add			WINDERMERE, FL 34786
X Remove			
2) X Change	P.T	LINDA ZIGLAR	709 MAIN STREET
Add			WINDERMERE, FLORIDA 23786
Remove			
3) Change			
Add			
Remove			<u> </u>
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Artic (Attach additional sheets, if necessary).	(Be specific)
N/A	
F. If an amendment provides for an exclusions for implementing the ame (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
() /// Jp/	
N/A	

	N/A	5/5/18	, if other the
The date of each amendment(s) date this document was signed.) adoption:	<u> </u>	, n one; u
•	8/A		
Effective date <u>if applicable</u> :			
	(no mo	ore than 90 days after amendme	nt file date)
Note: If the date inserted in thi document's effective date on the	is block does not meet Department of State's i	the applicable statutory filing records.	requirements, this date will not be listed
Adoption of Amendment(s)	(<u>CHECK O</u>	NE)	
The amendment(s) was/were by the shareholders was/were	adopted by the shareho sufficient for approval	lders. The number of votes cast	for the amendment(s)
☐ The amendment(s) was/were must be separately provided	approved by the shareh for each voting group of	olders through voting groups. The entitled to vote separately on the	The following statement c amendment(s):
"The number of votes c	ast for the amendment(s) was/were sufficient for appro-	val
N/A by			
	(voting gro	шр)	
☐ The amendment(s) was/were action was not required. ☐ The amendment(s) was/were			
action was not required.			
· comb	-/./		
Dated	5/5/18		
		0.0	
Signature	(Sula	Syla	<u> </u>
- (By	a director, president or	other officer - if directors or of	fficers have not been
sele	ected, by an incorporate	or $-$ if in the hands of a receiver.	trustee, or other court
	ointed tiduciary by that		
	LINDA ZIGLAR		
		or printed name of person signi	ng)
	OWNER P	esident	
		(Title of person signing)	