P17000048139

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DEC 1 4 2027 S. PRATHE

COVER LETTER

TO: Amendment Section

P.O. Box 6327 Tallahassee, FL 32314

Division of Corporations				
NAME OF CORPORATION: Alexia & Frankie's Beauty Bar				
DOCUMENT NUMBER: P 170000 48 39				
The enclosed Articles of Amendment and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
Alexia Nepola				
Alexia & Frankie's Beauty Bar				
9448 Harding Avenue				
Surf side, F1. 33154 City/ State and Zip Code				
alexiane pola agmail. com E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
Alexia Nepola ar 305, 528-7814				
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 \$\Bigcup \\$43.75 Filing Fee \& \Bigcup \\$43.75 Filing Fee \& \Bigcup \\$52.50 Filing Fee \& \Bigcup \\$52.50 Filing Fee \& \Bigcup \\$643.75 Filing Fee \\$643.75 F				
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of Corporations				
Division of Corporations Division of Corporations				

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

Articles of Amendment

to

Articles of Incorporation of

Alexia + trankies	beouty	bor inc		
(Name of Corporation as currently	y filed with the Florida	Dept. of State)	?	2022
P1700004	8139			5/
(Document Number of	f Corporation (if known)			. C.
Pursuant to the provisions of section 607.1006, Florida Statutes, this a its Articles of Incorporation:	Florida Profit Corporati	on adopts the following	g amendmer	nt(s) t
its / titles of meorpolation.			;;; ;;;	
A. If amending name, enter the new name of the corporation:			유리	∵;
			The new	ဌာ
name must be distinguishable and contain the word "corporation," "c "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A "chartered," "professional association," or the abbreviation "P.A."	company," or "incorporal professional corporali	ited" or the abbreviatio on name must contain	n "Corp.,"	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)				
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 addr	ess in Florida, enter the	e name of the		
new registered agent and/or the new registered office address		e mante or the		
Name of New Registered Agent				
Nume of New Negastered Agent			,	
(Florida str	uat addraws		-	
Triorital Siri	eer aaar ess)			
New Registered Office Address:	(City)	, Florida(Zip C	Codes	
	renti	(24)	· izacy	
New Registered Agent's Signature, if changing Registered Agent:	<u>:</u>			
I hereby accept the appointment as registered agent. I am familiar w		ations of the position.		
Signature of New R	egistered Agent, if chang	ring	-	
, ,	e e e e e e e e e e e e e e e e e e e	e.		
Chack if applicable				

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e). F.S.

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)

Example:

Remove

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	PI John D	<u>oe</u>	
X Remove	<u>V</u> <u>Mike Jo</u>	<u>ones</u>	
X Add	SV Sally S	<u>mith</u>	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	PST	Alexia Echevorria	18555 collins one
Add			sums isles ft 33160
Remove	PST	010000 110000	10555 0 11 0 510 #574
2) Change	1221	Alexia Nepola	18555 Culling ove #520 Sunny isles pe
Add			33/60
Remove 3) Change			
Add			
Remove			
4) Change			
Add			·
Remove			
5) Change			
Add			
Remove			
6) Change		·	
Add			

L. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)						
-						
						<u> </u>
				· · · · · · · · · · · · · · · · · · ·		
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_		1819-18	 			
		•				
. <u>If an a</u>	mendment prov	ides for an excl	nange, reclassifi	cation, or cancell	ation of issued sh	ares,
<u>provis</u> (ij	sions for implen I not applicable	nenting the ame indicate N/A)	endment if not c	ontained in the a	mendment itself:	
				<u> </u>		
						
						

The date of each amendment(s) adoptidate this document was signed.	on:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	l.
Note: If the date inserted in this block document's effective date on the Department.	does not meet the applicable statutory filing requirement nent of State's records.	s, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were adopted action was not required.	by the incorporators, or board of directors without shareh-	older action and shareholder
The amendment(s) was/were adopted by the shareholders was/were sufficient	by the shareholders. The number of votes cast for the ament for approval.	endment(s)
	d by the shareholders through voting groups. The followin voting group entitled to vote separately on the amendmen	
"The number of votes cast for th	ne amendment(s) was/were sufficient for approval	2022
by	<u></u>	SEP 12
	(voting group)	
Dated	9-7-22	1.
Signature	lixi Vepolar	A.); 7: 53
	r, president or other officer – if directors or officers have	
	an incorporator – if in the hands of a receiver, trustee, or of duciary by that fiduciary)	other court
appointed th	Alexia Nepola	
	(Typed or printed name of person signing)	
	Tresident	
	(Title of person signing)	