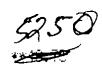
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(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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(Do	ocument Number)	
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Amendice

AUG 1 4 2017

I ALBRITTON

COVER LETTER

TO: Amendment Section Division of Corporations

SAME OF CORPO	RATION: ANDY CANDY M	AKEUP, INC	
OCUMENT NUM	BER: P17000060492	<u></u>	
he enclosed Articles	s of Amendment and fee are sul	omitted for filing.	
lease return all corre	espondence concerning this mat	ter to the following:	
	ANDRES MEREDITH		
		Name of Contact Person	
ANDY CANDY MAKEUP, INC.			
		Firm/ Company	
	P.O. BOX 291190		
		Address	
	PORT ORANGE, FL 32129-	1190	
		City/ State and Zip Code	
ande	@andycandymakeup.com		
	•	ed for future annual report	notification)
	is man address, (so be di	ed for fatale annual report	
for further information	on concerning this matter, pleas	e call:	
ANDRES MEREDI	ГН	at (965-6332
Name of Contact Person		Area Coo	le & Daytime Telephone Number
Enclosed is a check f	or the following amount made p	payable to the Florida Depa	rtment of State;
□ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	■\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
An Div P.C	niling Address nendment Section vision of Corporations D. Box 6327 dahassee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle ssee, FL 32301

Articles of Amendment to Articles of Incorporation

of

ANDY CANDY MAKEUP, INC.

(<u>Name</u>	of Corporation as curren	ntly filed with the Florida Dej	pt. of State)	M
P17000060492				ž O
	(Document Number	of Corporation (if known)	7.0	·:
Pursuant to the provisions of section 607 its Articles of Incorporation:	1006, Florida Statutes, th	is Florida Profit Corporation	adopts the following amend	di en t(s) to
A. If amending name, enter the new na	ime of the corporation:			
N/A			The	new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ration "Corp," "Inc," or	"Co". A professional corpo	porated" or the abbrevia	ition
B. Enter new principal office address,	if applicable:	N/A		
(Principal office address MUST BE A S		N/A		
		N/A		_
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		P.O. BOX 291190		- -
			129-1190	
				_
D. If amending the registered agent ar new registered agent and/or the ne			ume of the	_
Name of New Registered Agent	N/A			
		street address)		
New Registered Office Address:	N/A	,,,,,,	. Florida N/A	
New Negistered Conce matress.		(City)	(Zip Code)	
New Registered Agent's Signature, if c I hereby accept the appointment as regis.			ons of the position.	
	Signature of New	v 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	<u>PT</u>	John Doc	
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	PCEO	ANDRES MEREDITH	P.O. BOX 291190
X Add			PORT ORANGE, FL 32129-1190
Remove			
2) X Change	VCFO	JAMES R MEREDITH	P.O. BOX 21190
Add			PORT ORANGE, FL 32129-1190
Remove			equip.
3) Change		-	
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	ets, if necessary). (Be spec	ijie,		
N/A				

			-	·
				
, .				
				
			<u> </u>	
		···	<u> </u>	
F. If an amendment pro	ovides for an exchange, recl	assification, or cancel	lation of issued shares.	
if not applicabl	ementing the amendment if	not contained in the a	mendment itself:	
ANDRES MEREDITH 5				
JAMES R MEREDITH :	50 SHARES			
				·
				
· ···				
	<u> </u>			

	N/A	
The date of each amendment(s) date this document was signed.	adoption:	, if other than the
~	/A	
Effective date <u>if applicable</u> :		·
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the	s block does not meet the applicable statutory filing requirements, this dat Department of State's records.	e will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were a by the shareholders was/were	idopted by the shareholders. The number of votes east for the amendment(s) sufficient for approval.	ı
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	ıt
"The number of votes ca	ist for the amendment(s) was/were sufficient for approval	
hv N/A	"	
·//	(voting group)	
☐ The amendment(s) was/were a action was not required.	dopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were a action was not required.	idopted by the incorporators without shareholder action and shareholder	
08/01/20 Dated	17	
Signature	Londres Meredith	
(By a selec	director, president or other officer – if directors or officers have not been sted, by an incorporator – if in the hands of a receiver, trustee, or other court sinted fiduciary by that fiduciary)	
	ANDRES MEREDITH	
	(Typed or printed name of person signing)	
	PRESIDENT/CEO/INCORPORATOR	
	(Title of person signing)	