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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	BAR SALON & S	PA, INC	
DOCUMENT NUM	P17000075157 IBER:		
The enclosed Article	s of Amendment and fee are su	bmitted for filing.	
Please return all corr	espondence concerning this ma	tter to the following.	
	ALEYSHA DEPALMO		
		Name of Contact Perso	
	BAR SALON & SPAINC		
	561 TOMAHAWK COURT	Firm/ Company	
	PALM BEACH GARDENS,	Address FLORIDA 33410	,
	-	City/ State and Zip Coc	le
ALI	EYSHAPAINTS@GMAIL.CO	M	
	E-mail address; (to be us	sed for future annual report	t notification)
For further informati	on concerning this matter, please	se call:	
Garrett Leahy		561 at (2224603
Name	e of Contact Person	Area Co) ode & Daytime Telephone Number
Enclosed is a check	for the following amount made	payable to the Florida Dep	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)
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 of

BAR SALON & SPAUNC

(Name of Corporation as curren	tly filed with the Florida Dept. of State)		
P1700007517	,		
(Document Number	of Corporation (if known)		
Pursuant to the provisions of section 607,1006, Florida Statutes, thi its Articles of Incorporation:	is Florida Profit Corporation adopts the following amendment(s) to		
A. If amending name, enter the new name of the corporation:			
	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	"Co". A professional corporation name must contain the		
·	506 N US HWY I		
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	TEQUESTA		
	FL33469		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	506 N. US HWY 1		
(maining data ess <u>may me a tweet of tries max</u>)	TEQUESTA		
	191.33469		
	7.5		
D. If amending the registered agent and/or registered office ad new registered agent and/or the new registered office addre			
Name of New Registered Agent	HASSE.		
Name of New Negatives Agent	30		
	street address)		
New Registered Office Address:	Florida SS N D		
	(City) Tip Code		
	·		
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familia			
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 Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	P	ALEYSHA IACOVONE	6905 SW WOODBINE WAY
Add			PALM CITY
X Remove			FL 34990
2) Change	ŀ,	ALEYSHA DEPALMO	561 TOMAHAWK COURT
X Add			PALM BEACH GARDENS
Remove			F1.33410
3) Change			
Add			
Remove			1 2: I
4) Change			
Add			
Remove			
5)Change			
Add			
Remove			
6)Change			
Add			
Remare			

ttach additional sheets, if necessary). (Be specific)		
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	19 MAY 30 SELVILLAHASSIFE	
an amendment provides for an exchange, reclassification, or cancellation of issued shares,	30 SAT	
provisions for implementing the amendment if not contained in the amendment itself:	P	į
(if not applicable, indicate N/A)	95 2	Ų
	<u> 결</u>	_
	12.7	
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	> C3	_
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	SA Ca	-
	9A 89	- - -
	SA Ca	-

The date of each amendment(s) adoption:	_, if other than the
Effective date if applicable: (no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will document's effective date on the Department of State's records.	not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	2
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	3 =
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	3 0
Dated 5-26-19 Signature	•
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court	-
appointed fiduciary by that fiduciary) Aleysha Delay mo (Typed or printed name of person signing)	
(Typed or printed name of person signing)	
0 w 9 C	
(Title of person signing)	