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(Re	questor's Name)	
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	WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
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COVER LETTER

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TO: Amendment Secti Division of Corpo				
NAME OF CORPOR	ATION: GLAM AND GO N	AIAMI INC		
DOCUMENT NUME	BER: P170000	88187		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.		
Please return all corres	spondence concerning this ma	tter to the following:		
	Margarita Chaves			
		Name of Contact Person	1	
	<u></u>	Firm/ Company		
	19800 SW 180th Ave			
		Address	·	
	Miami FL, 33187	City/ State and Zip Cod	<u> </u>	
	.	City, State and Exp Cou	•	
Glam	andgomiami@gmail.com	sed for future annual report	notification	
For further informatio	n concerning this matter, plea			
Margarita Chaves		786	394-3200	
Name	of Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check for	or the following amount made	payable to the Florida Dep	artment of State:	
\$35 Filing Fee	Status Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Am Div P.O	iling Address endment Section ision of Corporations Box 6327 iahassee, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		

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Articles of Amendment	同時日日
Articles of Amendment	17 NOV 20 DU 1 00
Articles of Incorporation of	17 NOV 28 PH 4:08
GLAM AND GON	1 AMILINC.
(Name of Corporation as currently filed with the	Florida Dept. of State)
P170000881 <u>87</u>	
(Document Number of Corporation (ii	f known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit (its Articles of Incorporation:	Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation: A. A. A	or "incorporated" or the abbreviation sional corporation name must contain the
B. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADDRESS</u>)	
C. <u>Enter new mailing address, if applicable:</u> (Mailing address <u>MAY BE A POST OFFICE BOX</u>)	
D. If amending the registered agent and/or registered office address in Florida new registered agent and/or the new registered office address:	enter the name of the

Name of New Registered Agent		
	19800 SW 180th Ave	
	(Florida street address)	
No. Burnston & Office (dataset	Miami	33187 , Florida
New Registered Office Address:	(City)	(Zip Code)
	((, u))	

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<u>New Registered Agent's Signature, if changing Registered Agent:</u> I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signalure of Non Degistered 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 hold. 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:

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X Change	PT	<u>John Doe</u>	
X Remove	Σ	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
<u>Type of Action</u> (Check One)	Title	Namç	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add		I Constanting of the second	
Remove			
5) Change	- <u> </u>		
Add			
Remove			
6) Change			i
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets: 1/ necessary) (Be specific)

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	November 17, 2017	
The date of each amendment(s)	adoption:, 19	other than the
date this document was signed.	ovember 17, 2017	
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the l	s block does not meet the applicable statutory filing requirements, this date will not Department of State's records.	be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were a by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
The amendment(s) was/were a must be separately provided f	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	
"The number of votes ca	ast for the amendment(s) was/were sufficient for approval	
by	.11	
47 <u></u>	(voling group)	
The amendment(s) was/were a action was not required.	adopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were a action was not required.	adopted by the incorporators without shareholder action and shareholder	
11/17/20		
Dated		
(
Signature	1 A aware	
	a director, president or other officer - if directors or officers have not been	
	cted, by an incorporator – if in the hands of a receiver, trustee, or other court ointed fiduciary by that fiduciary)	
•hb	Since induitaly by the redutaly,	
	Margarita Chaves	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	

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