P17000094512

(Re	equestor's Name)	
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(Au	utess)	
(Cit	ty/State/Zip/Phone	e #)
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Certified Copies	_ Certificates	s of Status
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Special Instructions to	Filing Officer:	
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MAR 03 2020 C MCWAIR

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: DOCUMENT NUMBER:

The enclosed Articles of Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Tracy I-razier
Name of Contact Person
Firm/ Company
762 Bryant Rd. SW.
Address
Falm Bay, FL 32908
City/ State and Zip Code
E-mail address: (to by used for future annual report notification)
9

For further information concerning this matter, please call:

Enclosed is a check for the following amount made payable to the Florida Department 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 The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to

Articles of Inc	corporation	05
Like & Star Hair S	Studio, Inc.	E8 228
P17000094512	ly filed with the Florida Dept. of State)	P. A.
(Document Number o	f Corporation (if known)	205 "
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the follow	ving amendment(s) to
A. If amending name, enter the new name of the corporation:		
name must be distinguishable and contain the word "corporation," "o" Inc.," or Co.," or the designation "Corp." "Inc," or "Co". A "chartered," "professional association," or the abbreviation "P.A."	A professional corporation name must cont	
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)	4311 Norflik Park	iwaySuH
	West Melbourne	<u>;;FL'3</u> Z901 ——
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address		
Name of New Registered Agent L30 Pos	Tinsley sen Court	
New Registered Office Address: Palm Bo	(City) . Florida 3	2905 p Code)
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar v		n.
Gignature of New R	Registered Agent. if changing	_
Charlest and Backle		

Check 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:

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	PT John De	<u>əc</u>	
X Remove	<u>V</u> <u>Mike Jo</u>	ones .	
<u>X</u> Add	SV Sally S	mith_	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	DVP	Tracy Frazier	762 Bryant Rd. Sw.
Add Ramous			raim Day, FL 32908
Remove 2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove 6)Change			
Add			
Remove			

Attach ac	ional sheets, if necessary). (Be specific)	
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f an ame	ment provides for an exchange, reclassification, or cancellation of issued shares,	
provisio	for implementing the amendment if not contained in the amendment itself:	
(if n	for implementing the amendment if not contained in the amendment itself: applicable, indicate N/A)	
,,,		
-		

he date of each amendment(s) adoption:	, if other than the
ate'(his document was signed. Affective date if applicable: 12 - 31 - 2019	
(no more than 90 days after amendment file date)	
ote: If the date inserted in this block does not meet the applicable statutory filing requirements, this dat ocument's effective date on the Department of State's records.	e will not be listed as the
doption of Amendment(s) (<u>CHECK ONE</u>)	
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action action was not required.	n and shareholder
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.	5)
The amendment(s) was/were approved by the shareholders through voting groups. The following stateme must be separately provided for each voting group entitled to vote separately on the amendment(s):	nt
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by 3 rotes cast	
(voting group)	
Dated 2-25-2020	
Signature Jacy Fagur	
(By a director, president or other edicer — 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)	
(Typed or printed name of person signing)	
Vice Dracident	
(Title of person signing)	