P18000029146

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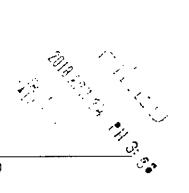
COVER LETTER

. TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: GLORY CROWN	SALON INC.	
	BER: P18000029146		
The enclosed Articles	s of Amendment and fee are su	bmitted for filing.	
Please return all corre	espondence concerning this ma	tter to the following:	
	Shannon Stahlin		
		Name of Contact Persor	1
	Direct Incorporation		
		Firm/ Company	
	315 W Huron St, Ste 240		
		Address	
	Ann Arbor, MI 48103		
		City/ State and Zip Code	2
docu	ments@directincorp.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further information	on concerning this matter, pleas	se call:	
Shannon Stahlin		at (<u>877</u>	281-6496
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check f	or the following amount made	payable to the Florida Depa	artment of State:
□ \$35 Filing Fee	■S43.75 Filing Fee & Certificate of Status	□S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐S52.50 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 Ilahassee, FL 32314	Amend Divisio Clifton	Address Iment Section on of Corporations Building Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



- GLORY CROWN SALON INC.

Planuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment its Articles of Incorporation: A. If amending name, enter the new name of the corporation: Crown of Glory Salon Inc. The new name must be distinguishable and contain the word "corporation." "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain the word "chartered." "professional association" or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) TAMPA. FL 33613 C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) TAMPA, FL 33613 D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent	(Name of Corporation as current	tly filed with the Florida Dept. of State)		
Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment its Articles of Incorporation: A. If amending name, enter the new name of the corporation: Crown of Glory Salon Inc. The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) TAMPA. FL 33613 C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) TAMPA, FL 33613 D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent	P18000029146			
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C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) TAMPA, FL 33613 14569 SEAFORD CIR APT 101 TAMPA, FL 33613 D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent	R Enter new principal office address if applicable	14569 SEAFORD CIR APT 101		
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	D. If amending the registered agent and/or registered office ad new registered agent and/or the new registered office addre	dress in Florida, enter the name of the		
	Name of New Registered Avent			
14569 SEAFORD CIR APT 101		14569 SEAFORD CIR APT 101		
(Florida street address)	(Florida :	street address)		
New Registered Office Address: TAMPA , Florida, Florida	TAMPA New Registered Office Address:	. Florida 33613		
(City) (Zip Code)		(City) (Zip Code)		

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 Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) X Change	p	MARGALIE COLEAU	14569 SEAFORD CIR APT 101
Add			TAMPA, FL
Remove			33613
2) X Change	DIR	MARGALIE COLEAU	14569 SEAFORD CIR APT 101
Add			TAMPA, FL
Remove			33613
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
δ) Change			
Add			
Remove			

samending or adding additional Articular Articular additional sheets, if necessary).	(Be specific)			
				
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f an amen <u>dment provides for an exc</u> l	hanga vaalassisiaati	on or concellatio	n of irenad chare	•
provisions for implementing the ame	endment if not conta	ained in the amen	dment itself:	<u>31</u>
(if not applicable, indicate N/A)				
	<u> </u>			
		. <u> </u>		

The date of each amendment(s	adoption:	, if other than the
date this document was signed.	· · · · · · · · · · · · · · · · · · ·	
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in the document's effective date on the	s block does not meet the applicable statutory filing requirements, the Department of State's records.	is date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendmes sufficient for approval.	nent(s)
☐ The amendment(s) was/were must be separately provided	approved by the shareholders through voting groups. The following surfor each voting group entitled to vote separately on the amendment(s)	atement :
	ast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	adopted by the board of directors without shareholder action and share	holder
☐ The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and sharehold	ег
Dated	4-16-18	
Signature		<u> </u>
selo	a director, president or other officer - if directors or officers have not ected, by an incorporator - if in the hands of a receiver, trustee, or othe ointed fiduciary by that fiduciary)	
	MARGALIE COLEAU	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	