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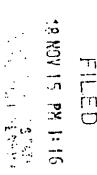




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COVER LETTER

TO: Amendment Section

P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations Beauty & Brains Enterprises, Inc P18000056646 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Blauty & Brains Enterprises 1830 N. University Drive antation. Fi 35322 City/ State and Zip Code beauty brains inc. com E-mail address: (to be used for future annual report notification) 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 & **□\$**43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status Certified Copy (Additional copy is enclosed) (Additional Copy is enclosed) **Mailing Address** Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment

to

Articles of Incorporation

	of		
Brains Enterpr (Name of Corporation	nses Inc.		
(Name of Corporation	as currently filed with the	e Florida Dept. of State)	
P1800005	Slolo4lo		
1 1 2 2 2 2	nt Number of Corporation (i	f known)	···-··································
Pursuant to the provisions of section 607.1006, Florida S its Articles of Incorporation: A. If amending name, enter the new name of the corp	•	Corporation adopts the following	g amendment(s) to
The state of the total and the total confidence of the total	,		The new
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp," word "chartered," "professional association," or the ab	"Inc," or "Co". A profes		bbreviation
B. Enter new principal office address, if applicable:		` **	తే
(Principal office address MUST BE A STREET ADDR	ESS)		<u> </u>
		<u> </u>	
			<u></u> ∰
C. Enter new mailing address, if applicable:		···· •	₹
(Mailing address MAY BE A POST OFFICE BOX)		ت - د ب تع	,
		्री ती दुरेन्स	16
		*	
D. If amending the registered agent and/or registered	d office address in Florida,	enter the name of the	
new registered agent and/or the new registered of	fice address:		
Name of New Registered Agent			_
 	(Florida street address)		-
Name Province and Office Address		PL-24-	
New Registered Office Address:	(City)	, Florida(Zip (Code)
	•	·	
New Registered Agent's Signature, if changing Regist			
I hereby accept the appointment as registered agent. I a	ım familiar with and accept	the obligations of the position.	
Signate	ure 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.

X Change	PT John Doe	
X Remove	<u>V</u> <u>Mike Jones</u>	
X Add	SV Sally Smith	
Type of Action (Check One)	<u>Title</u> <u>Name</u>	<u>Addres</u> s
1) Change	P Tistany Patterson	1850 N. University Drive
Add Remove		#249 <u>Plantation</u> , 17 33322
2) Khange	coo Sheikera Williams	1830 N. University Dru-
Add Remove 3) Change	CFG Sheikeva Williams	Plantation. FL 35322 1830 N. University Drive
Add	<u> </u>	Plantation, FL 3322
Remove 4) Change		
Add		
5) Change		
Remove		
6) Change Add		
Remove		

an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself; (if not applicable, indicate N/A)		Articles, enter changery). (Be specific)	<u> </u>		
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The date of each amendment(s) adoption:date this document was signed.	November 12, 2018	, if other than the
•	November 17, 2018	
Effective date if applicable:	(no more than 90 days after amendment file date)	
	(no more than 50 days after amerianem file date)	
Note: If the date inserted in this block does document's effective date on the Department o	not meet the applicable statutory filing requirements f State's records.	, this date will not be listed as the
Adoption of Amendment(s) (Cl	HECK ONE)	
☐ The amendment(s) was/were adopted by the by the shareholders was/were sufficient for	e shareholders. The number of votes cast for the amer approval.	ndment(s)
	ne shareholders through voting groups. The following group entitled to vote separately on the amendment	
	endment(s) was/were sufficient for approval	
by	oting group)	
(ve	oting group)	
☐ The amendment(s) was/were adopted by the action was not required.	board of directors without shareholder action and shareholder	archolder
The amendment(s) was/were adopted by the action was not required.	e incorporators without shareholder action and shareholder	older
Dated il 12.1	8	
Signature		
	sident or other officer – if directors or officers have neorporator – if in the hands of a receiver, trustee, or ot	
	y by that fiduciary)	ner court
	Sharkan William	
	Sherkera Williams	·
	(Typed or printed name of person signing)	
	Chief Financial Officer	

(Title of person signing)