

*P18000086334*

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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R. WHITE  
OCT 25 2018

To: Division of Corporations  
Fax Number : (850) 617-6380

From: Account Name : GENERAL SOLUTIONS INC  
Account Number : I20140000086  
Phone : (305) 255-3310  
Fax Number : (305) 255-3320

*NcfAnd*

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: blanca@general-solutionsinc.com

RECEIVED  
2018 OCT 24 AM 7:49  
SECRETARY OF STATE  
TALLAHASSEE FL

COR AMND/RESTATE/CORRECT OR O/D RESIGN  
BEAUTY MANAGEMENT CORP

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$35.00

2018 OCT 24 AM 10:30  
SECRETARY OF STATE  
TALLAHASSEE FL

FILED

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: BEAUTY MANAGEMENT CORP

DOCUMENT NUMBER: P18000086334

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

Please return all correspondence concerning this matter to the following:

BLANCA ZACARIAS  
Name of Contact Person  
GENERAL SOLUTIONS INC  
Firm/ Company  
13205 SW 137TH. AVE SUITE 113  
Address  
MIAMI, FL 33186  
City/ State and Zip Code

BLANCA@GENERAL-SOLUTIONSINC.COM  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

BLANCA ZACARIAS at (305) 255-3310  
Name of Contact Person Area Code & Daytime Telephone Number

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  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

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04:46:57 p.m. 10-23-2018 3/6  
**FILED** 2011183

Articles of Amendment  
to  
Articles of Incorporation  
of

2018 OCT 24 AM 10:30

BEAUTY MANAGEMENT CORP

SECRETARY OF STATE  
TALLAHASSEE, FL

(Name of Corporation as currently filed with the Florida Dept. of State)

P18000086334

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

**A. If amending name, enter the new name of the corporation:**

PASARELA DOMINICAN SALON, CORP

*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**)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**C. Enter new mailing address, if applicable:**

(Mailing address **MAY BE A POST OFFICE BOX**)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**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 \_\_\_\_\_

(Florida street address)

New Registered Office Address: \_\_\_\_\_, Florida \_\_\_\_\_  
(City) (Zip Code)

**New Registered Agent's Signature, if changing Registered Agent:**

*I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.*

\_\_\_\_\_  
*Signature of New Registered Agent, if changing*

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

Horizontal lines for text entry.

**F. If 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)*

Horizontal lines for text entry.

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The date of each amendment(s) adoption: 10/23/18, if other than the date this document was signed.

Effective date if applicable: 10/23/18  
(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 not be listed as the document's effective date on the Department of State's records.

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 \_\_\_\_\_"  
(voting group)

The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.

The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Dated 10/23/18

Signature Rainelda Urbaez

(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)

RAINELDA URBAEZ

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

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