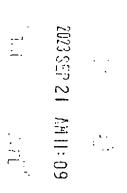
## P18000094307

| (Requestor's Name)                      |
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| PICK-UP WAIT MAIL                       |
| (Business Entity Name)                  |
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| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer. |
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Office Use Only

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## **COVER LETTER**

TO: Amendment Section

**Mailing Address** 

P.O. Box 6327

Amendment Section

Division of Corporations

**Division of Corporations** NAME OF CORPORATION: CARE4HAIR INC DOCUMENT NUMBER: P18000094307 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: DANAY ALEGRE Name of Contact Person DALE SOLUTION MIAMILLC Firm/ Company 1148 SW 67TH AVENUE Address MIAMI FL 33144 City/ State and Zip Code DANAY.ALEGRE@DALESOLUTIONMIAMI.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (786 ) 414-1601 Area Code & Daytime Telephone Number DANAY ALEGRE Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: S35 Filing Fee ☐\$43.75 Filing Fee & ☐\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed)

Street Address
Amendment Section

Division of Corporations

The Centre of Tallahassee

## Articles of Amendment to Articles of Incorporation of

|   |                          | •   | 2023 SEP <b>2</b> 1                | AH II: 09            |
|---|--------------------------|---|------------------------------------|----------------------|
| (Name of Co   | poration as currently    | filed with the Florida Dept. o                                | f State)                           |                      |
| P18000094307  |                          |   | 1                                  | - 71 <u>-</u>        |
|   | (Document Number of      | Corporation (if known)  |                                    |                      |
| Pursuant to the provisions of section 607.1006, its Articles of Incorporation:  | Florida Statutes, this a | <i>Florida Profit Corporation</i> adop                        | ts the following                   | ; amendment(s) to    |
| A. If amending name, enter the new name of  | f the corporation:       |   |                                    |                      |
|   |                          |   |                                    | The new              |
| name must be distinguishable and contain the w "Inc.," or Co.," or the designation "Corp." chartered," "professional association," or the | ""Inc," or "Co". A       | ompany," or "incorporated" or<br>professional corporation nam | the abbreviation<br>e-must-contain | "Corp.,"<br>the word |
| B. Enter new principal office address, if app<br>(Principal office address MUST BE A STREE  |                          |   |                                    |                      |
| C. Catanana and a Standard Constitution   |                          |   |                                    |                      |
| C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF)   |                          |   |                                    |                      |
|   |                          |   |                                    |                      |
|   |                          |   |                                    |                      |
| D. If amending the registered agent and/or  | rouistored office addr   | are in Klarida, antar the name                                | of the                             |                      |
| new registered agent and/or the new reg   |                          |   | or the                             |                      |
| Name of New Registered Agent DAL  | E SOLUTION MIAN          | LLC   |                                    |                      |
|   | SW 67TH AVENUE           | -   |                                    |                      |
|   | (Florida stre            | et address)   |                                    |                      |
| New Registered Office Address:  | MI                       | 171   | 33144<br>lorida                    |                      |
| New Registered Office Address.  |                          | City)   | (Zip C                             | ode)                 |
|   |                          | · 11,7  | (23)                               | ,                    |
|   | <b>n</b>                 |   |                                    |                      |
| New Registered Agent's Signature, if changi<br>I hereby accept the appointment as registered a  |                          | ith and accept the obligations of                             | the position.                      |                      |
|   | Dal                      | 4   | ·                                  |                      |
|   | Signature of New Re      | gistered Agent, if changing                                   |                                    |                      |

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                   | $\underline{\mathbf{PT}}$ | 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) Change                  | P                         | YARIEL GONZALEZ | 8500 SW 8ST STE 246 |
| Add<br>X<br>Remove         |                           |                 | MIAMI FL 33144      |
| 2) Change                  | P                         | SARAH LABRADOR  | 8500 SW 8ST STE 246 |
| X Add                      |                           |                 | MIAMI FL 33144      |
| Remove 3) Change           |                           |                 |                     |
| Add                        |                           |                 | <del></del>         |
| Remove                     |                           | _               |                     |
| Add                        |                           |                 |                     |
| Remove 5) Change           |                           | _               |                     |
| Add                        |                           |                 |                     |
| Remove                     |                           |                 |                     |
| 6) Change Add              |                           |                 |                     |
| Remove                     |                           |                 |                     |

| xttach <i>additional</i> | sheets, if necessary) | ). (Be specific) |                    |                    |             |
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| fan amendment            | provides for an ex    | change, reclassi | fication, or cance | ellation of issued | shares,     |
| provisions for ig        | nplementing the an    | nendment if not  | contained in the   | amendment itsel    | <u>lf:</u>  |
| (if not applic           | cable, indicate N/A)  |                  |                    |                    |             |
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| The date of each amendment(s) adoption:  | other than the |
|--|----------------|
| 09/01/2023   |                |
| Effective date if applicable:  (no more than 90 days after amendment file date)  |                |
| <b>Note:</b> If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be document's effective date on the Department of State's records.                | : listed as th |
| Adoption of Amendment(s) (CHECK ONE)   |                |
| ☐ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareh action was not required.   | older          |
| The amendment(s) was/were adopted by the shareholders. The number of votes east 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 east for the amendment(s) was/were sufficient for approval  |                |
| YARIELGONZALEZ AND SARAH LABRADOR "  |                |
| (voting group)   |                |
| 09/01/2023<br>Dated  |                |
| Signature ##   |                |
| (By a director, president of 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) |                |
| YARIEL GONZALEZ  |                |
| (Typed or printed name of person signing)  | <del></del>    |
| PRESIDENT  |                |

(Title of person signing)