## P19000000 653

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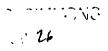
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## COVER LETTER .

TO: Amendment Section Division of Corporations

BELLISIMA S NAME OF CORPORATION:	SALON & SPA, INC.
P1900000653	
DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee ar	re submitted for filing.
Please return all correspondence concerning this	s matter to the following:
ELISABETH PAULIER DE RONDON	
	(Name of Contact Person)
BELLISIMA SALON & SPA, INC.	
	(Firm/ Company)
13512 GORGONA ISLE DRIVE	
	(Address)
WINDERMERE, FL 34786	
	(City/ State and Zip Code)
elisabeth_paulier@hotmail.com	
E-mail address: (to b	e used for future annual report notification)
For further information concerning this matter, p	please call:
ELISABETH PAULIER DE RONDON	(267) 357-5505
(Name of Contact I	Person) (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount ma	ade payable to the Florida Department of State:
■ \$35 Filing Fee □\$43.75 Filing F Certificate of S	Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee  tatus Certified Copy Certificate of Status  (Additional copy is enclosed) (Additional Copy is Enclosed)
Mailing Address	Street Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Amendment Section **Division of Corporations** Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## Articles of Amendment Articles of Incorporation οf

(Name of Corporation as curren	tly filed with the l	Iorida Dept. of State)
P1900000653		
(Document Numb	er of Corporation (	f known)
Pursuant to the provisions of section 617.1006, Florida Statute amendment(s) to its Articles of Incorporation:	s, this <i>Florida Not</i>	For Profit Corporation adopts the following
A. If amending name, enter the new name of the corporati	ion:	
N/A		The new
name must be distinguishable and contain the word "corporat "Company" or "Co," may not be used in the name.	tion" or "incorpor	ited" or the abbreviation "Corp." "Inc."
B. Enter new principal office address, if applicable:	N/A	ELGG E
Principal office address <u>MUST BE A STREET ADDRESS</u> )	1	22
		m9 <b>E</b>
C. Paramana and Paramatha and Grand Paril		OR OR
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	
). If amending the registered agent and/or registered offic		J
new registered agent and/or the new registered office a		da, enter the name of the
Name of New Registered Agent: N/A	<del></del>	
	<del>-</del> <del></del>	(Florido street address)
New Registered Office Address:		TO TO THE TOTAL PERSON
		Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered hereby accept the appointment as registered agent. I am fai	Agent: niliar with and acc	ept the obligations of the position.
Si	gnature of New Re	gistered 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.

Example: XChange X Remove X Add	PT         John I           Y         Mike           SV         Sally 5	<u>Jones</u>	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	P	Elisabeth Paulier DE Rondon	13512 GORGONA (SILE DRIVE
X Add			
Remove			WINDERMERE, FLYN 186
2) Change	P	ELISABETH CHARANIYA	13512 GORGONA ISLANTAVE
Add			WINDERMERE, FL 34786
Remove			
3 ) Change			
Add			
Remove			
4) Change	-		
Add			
Remove			
5) Change	<del></del>		
Add			
Remove			
6)Change	<del></del>		
Add			
Remove			

If amending or adding additional Articles, enter (attach additional sheets, if necessary). (Be special additional sheets)	cific)			
/A				
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•	01/17/2019	tati ali ali ali ali a
The date of each a date this document	amendment(s) adoption:	, if other than the
-200	01/17/2019	
Effective date <u>if a</u>	(no more than 90 days after amendment file date)	
	nserted in this block does not meet the applicable statutory filing requirements, this date we date on the Department of State's records.	will not be listed as the
Adoption of Amer	ndment(s) ( <u>CHECK ONE</u> )	
	ent(s) was/were adopted by the members and the number of votes cast for the amendmen ficient for approval.	t(s)
	members or members entitled to vote on the amendment(s). The amendment(s) was/wer ne board of directors.	e
Date	01/17/2019- d	
Sign	ature Elisabeth Paulier DE Rondon.	······
	(By the chairman or vice chairman of the board, president or other officer-if director have not been selected, by an incorporator – if in the hands of a receiver, trustee, of other court appointed fiduciary by that fiduciary)	
	Elisabeth Paulier DE Rondon	是
	(Typed or printed name of person signing)	SSECTION OF THE PROPERTY OF TH
	President .	FLORING OF
	(Title of person signing)	7