## P19000005813

(Requ	uestor's Name)	
(Addı	ress)	
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(City/	State/Zip/Phon	e #)
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(Busi	ness Entity Nar	ne)
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## **COVER LETTER**

TO: Amendment Section

Division of Corporations

NAME OF CORPO	ORATION: PB on Hendricks I	ne d/b/a Pure Barre San M	arco	
	1BER: P19000005813			
The enclosed Article	es of Amendment and fee are su	bmitted for filing.		
Please return all corn	respondence concerning this ma	atter to the following:		
	Amanda Farrell			
		Name of Contact Perso	n	
	PB on Hendricks Inc			
		Firm/ Company		
	8540 Homeplace Dr Apt 115	6		
		Address		
	Jacksonville, FL 32256			
		City/ State and Zip Cod	e	
	afarrell@purebarre.com			
		sed for future annual report	notification)	
For further informati	on concerning this matter, plea	se call:		
Amanda Farrell		904 at (	327-7518	
Name of Contact Person		Area Co	de & Daytime Telephone Number	
Enclosed is a check t	for the following amount made	payable to the Florida Depa	artment 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)	
	niling Address		Address	
	rendment Section	Amendment Section		
Division of Corporations P.O. Box 6327		Division of Corporations The Centre of Tallahassee		
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

	of Corporation as currently	filed with the Florida Dept. of	State)
P19000005813			
	(Document Number of	Corporation (if known)	
Pursuant to the provisions of section 607 ts Articles of Incorporation:	.1006, Florida Statutes, this I	Florida Profit Corporation adopts	s the following amendment(s
A. If amending name, enter the new n Not Applicable	ame of the corporation:		771
ame must be distinguishable and contain 'Inc.,'' or Co.,'' or the designation "C 'chartered,'' "professional association,'	Corp," "Inc," or "Co". A	ompany," or "incorporated" or the professional corporation name	Thenew ne abbreviation "Corp.," must_contain;the_word
3. Enter new principal office address,	if applicable:	Not Applicable	Ϋ,
Principal office address <u>MUST BE A S</u>			1
			: 3
			<del></del>
. Enter new mailing address, if appl (Mailing address MAY BE A POST		Not Applicable	ان
. If amending the registered agent ar new registered agent and/or the new	w registered office address:	ess in Florida, enter the name o	f the
. If amending the registered agent ar new registered agent and/or the new Name of New Registered Agent	w registered office address: Amanda Farrell		f the
new registered agent and/or the new	w registered office address: Amanda Farrell 8540 Homeplace Dr Apt 11	56	f the
new registered agent and/or the new	w registered office address: Amanda Farrell  8540 Homeplace Dr Apt 11  (Florida stre	56	
new registered agent and/or the new	w registered office address: Amanda Farrell  8540 Homeplace Dr Apt 11  (Florida street) Jacksonville	56 et address), Flo	rida
new registered agent and/or the new Name of New Registered Agent	w registered office address: Amanda Farrell  8540 Homeplace Dr Apt 11  (Florida street) Jacksonville	56 et address)	32256
Name of New Registered Agent	Amanda Farrell  8540 Homeplace Dr Apt 11  (Florida streen)  Jacksonville	56 et address), Flo	rida <u>32256</u> (Zip Code)
new registered agent and/or the new Name of New Registered Agent  New Registered Office Address:  www.registered Office Address:	Amanda Farrell  8540 Homeplace Dr Apt 11  (Florida streen)  Jacksonville  hanging Registered Agent: ered agent. I am familiar ween supported to the streen of the streen o	56 et address), Flo	rida <u>32256</u> (Zip Code)

☐ 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)

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	Amanda Farrell	8540 Homeplace Dr
Add			Apt 1156
Remove			Jacksonville, FL 32256
2) Change		Not Applicable	
Add			
Remove 3) Change		Not Applicable	
Add			
Remove			
4) Change		Not Applicable	
Add			
Remove			
5) Change		Not Applicable	
Add			
Remove			
6) Change		Not Applicable	
Add			
Remove			

L. If amending or adding additional A (Attach additional sheets, if necessary)	rticles, enter change(s)   ). (Be specific)	nere:		
Not Applicable				
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If an amendment provides for an ex	change, reclassification.	or cancellation of issue	d shares,	
provisions for implementing the an (if not applicable, indicate N/A)	nendment if not contain	ed in the amendment its	<u>self:</u>	
ot Applicable				
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The date of each amendment(s date this document was signed.	y adoption.	, if other than the
	eccember 16th, 2020	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Note: If the date inserted in thi document's effective date on the	s block does not meet the applicable statutory filing requirements, this date will Department of State's records.	not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors without shareholder action and	shareholder
☐ The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	
"The number of votes ca	ast for the amendment(s) was/were sufficient for approval	
by Not Applicable	9	
9,	(voting group)	
12/16/20 Dated	20	
Signature_	monds A	
(By a selec	director, president or other officer – if directors or officers have not been sted, by an incorporator – if in the hands of a receiver, trustee, or other court sinted fiduciary by that fiduciary)	_
	Amanda Katherine Farrell	
	(Typed or printed name of person signing)	
	President/Owner	
	(Title of person signing)	