Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H19000306125 3)))



H190003061253ABC

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : FASTKIT CORP

Account Number : I20100000009 : (305)599-0839

Phone Fax Number

: (305)592-9591

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

Email Address:__

COR AMND/RESTATE/CORRECT OR O/D RESIGN

MIA SPA & BEAUTY SALON INC

0
0
04
\$35.00

OCT 16 2019

i ALBRITTON

Electronic Filing Menu

Corporate Filing Menu

Help

Articles of Amendment to Articles of Incorporation of

72

203: 1-13 22 9:41

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 matting address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) HIALBAH FL 33015 D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered affects address: MONIKA GALLARDO MORALES	MIA SPA & BEAUTY SALON INC			
(Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendm its Articles of Incorporation: A. If amending name, enter the new name of the corporation: The ne 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) HIALEAH FL 33015 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: MONIKA GALLARDO MORALES	(Name of Corporation as currently filed with the Florida Dept. of St.		filed with the Florida Dept. of State)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendm its Articles of Incorporation: A. If amending name, enter the new name of the corporation: 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 malling address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) HIALEAH FL 33015 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: MONIKA GALLARDO MORALES	P19000007690			
A. If smending name, enter the new name of the corporation: The name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "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 malling address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) HIALEAH FL 33015 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: MONNKA GALLARDO MORALES				
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "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) HIALEAH FL 33015 D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered office address: MONIKA GALLARDO MORALES	Pursuant to the provisions of section 607.10 its Articles of Incorporation:	06, Florida Statutes, this I	Torida Profit Corporation adopts the following	amendment(s)
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "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) HIALEAH FL 33015 D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered office address: MONIKA GALLARDO MORALES	A. If amonding name, enter the new nan	e of the corporation:		
"Corp.," "Inc.," or Co.," or the designation "Corp., Inc., or Co.," projections 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) HIALEAH FL 33015 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: MONIKA GALLARDO MORALES				The new
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) HIALEAH FL 33015 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: MONIKA GALLARDO MORALES	we had a ward a section designed.	non "Loro. INC. Vr s	CO , M DI DICUDIONICIO CON PORTICIO	previation ontain the
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: MONIKA GALLARDO MORALES	B. Enter new principal office address, if (Principal office address MUST BE A ST	npplicable: REET ADDRESS)		
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: MONIKA GALLARDO MORALES	C. Enter new mailing address, if applicable; (Mailing address MAY BE A POST OFFICE BOX)		7648 NW 168 STREET	
new registered agent and/or the new registered office address: MONTK A GALLARDO MORALES			HIALBAH FL 33015	
Name of New Registered Agent MONIKA GALLARDO MORALES	D. If amending the registered agent and new registered agent and/or the new	registered office address	<u>1-</u>	
	Name of New Registered Avent	MONIKA GALLARDO I	MORALES	-
7648 NW 168 STREET				-
(Florida street address)		•	reet address)	
New Registered Office Address: HIALEAH , Florida 33015 (City) (Zip Code)	New Registered Office Address:	HIALEAN	, Florida	Code)

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	PT	John Doe	•
X Remove	<u>y</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action	Title	Name	<u>Addres</u> s
(Check One)	P,S	CLAUDIA OLIVERA	12800 SW 16TH STREET
1) Change			MIAMI FL 33175 US
Add Remove			
Remove	P,5	monika gallardo morales	7648 NW 168 STREET
2)Change	<u> </u>		HIALEAH, FL 33015
X Add			
Remove			
3) Change			
Add			
Remove			
4) Change		· · · · · · · · · · · · · · · · · · ·	
Add			
Remove			
5) Chango			
Add			
Remove			
の Change			
Add			
Remove			

amending or adding additional mach additional sheets, if necessor	ary). (Be specific)			
				<u> </u>
				
				
		 -		
	<u> </u>			
<u>. </u>				
If an amendment provides for	an exchange, reclassi	fication, or cancella	andment itself:	
If an amendment provides for provisions for implementing	he amendment if nor	contained in tite and	CHARLEOT FISCHER	
(if not applicable, indicate	N/A)			
				<u> </u>
	_			
				
			_	
	,			
	,			<u></u>

	10/15/2019	, if other than the
The date of each amendment date this document was signed.	(s) adoption:	
Effective date if applicable:	(no more than 90 days after amendment file date)	
Note: If the date inscribed in document's effective date on t	this block does not meet the applicable statutory filing requirements, this dat the Department of State's records.	e will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/we by the shareholders was/w	re adopted by the shareholders. The number of votes east for the amendment(s ere sufficient for approval.	
	ere approved by the shareholders through voting groups. The following statemed for each voting group entitled to vote separately on the amendment(s):	ni
"The number of vote	is cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
☐ The amendment(s) was/w action was not required.	ere adopted by the board of directors without shareholder action and sharehold	er _.
The amendment(s) was/v action was not required.	ere adopted by the incorporators without shareholder action and shareholder	
	15/2019	
Dated	Malland Hale officer - if directors or officers have not been	
Signiture	(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 con appointed fiduciary by that fiduciary)	ırt
	MONIKA GALLARDO MORALES	
•	(Typed or printed name of person signing)	
	PRESIDENT	
•	(Title of person signing)	