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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION:	:Nails_	Palm	And	Spa Inc.
DOCUMENT NUMBER:		P190	0000	10877
The enclosed Articles of Amend	dment and fee are submit	ted for filing.		
Please return all correspondence	=		_	
		Dien	v.	Ho Spx Inc. Lake Blvd OCH, 7L 33408
	N	ame of Conta	ct Person	
	Nails	Palme	and	Six Inc.
		Firm/ Com	pany	-
		382 /	Un/4	Lake Blvd
		Addres	s _	
	Nan	+ Paln	u Bo	OC14 7L 33408
	С	ity/ State and	Zip Code	
E-m	ail address: (to be used fo	or future annua	al report n	otification)
	`		•	,
For further information concerni	ing this matter, please cal	1:		
D1	en V 40	at (8/3	243 - 8695 & Daytime Telephone Number
Name of Contact	Person	,	Area Code	& Daytime Telephone Number
Enclosed is a check for the follo	wing amount made payab	ole to the Flori	ida Depart	ment of State:
□ \$35 Filing Fee □ \$4 Ce	(,	843.75 Filing Certified Copy Additional copenclosed)	y'	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Addr Amendment S Division of Co P.O. Box 632	Section orporations			ent Section of Corporations

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

Articles of In	corporation "9	
ο· Λ /		
	Palm and Spa Inc. 9 thy filed with the Florida Dept. of State)	ρ.,
		<
	0000/0877 of Corporation (if known)	
	·	
rsuant to the provisions of section 607.1006, Florida Statutes, this Articles of Incorporation:	. Florida Profit Corporation adopts the following am	endm
If amending name, enter the new name of the corporation:		
wantenoning hante, enter the new hante of the corporation.		
me must be distinguishable and contain the word "corporation	on," "company," or "incorporated" or the abbrev	nev viatio
Corp.," "Inc.," or Co.," or the designation "Corp." "Inc." or ord "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must conto "P.A."	tin the
Enter new principal office address, if applicable:		
rincipal office address MUST BE A STREET ADDRESS)	NaTH Palm BeacH	<u>7</u> ;
	3340	<u>~</u> ਨ
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	_ 382 NUTHLAKE Blud	
	NUTH I Halm Beach, 70	
	3340	
If amending the registered agent and/or registered office add new registered agent and/or the new registered office address		
	7.	
Name of New Registered Agent		
(Florida st	reet address)	
	reet address)	
(Florida sti	reet address), Florida(City) (Zip 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.

Mike Jones, V as Remove Example:	, and Sai	lly Smith, SV as an Add.	
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) Change		_	
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
A) Changa			
4) Change			
Add Remove			
5) Change			
Add			·
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Attach additional sheets, if necess	sary). (Be specific)	_		
		<u> </u>		
		 .	<u> </u>	-
			_	<u>.</u>
	<u></u>			
				
		1		
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Can amount and a constitution of				
an amendment provides for an provisions for implementing the	<u>g amendment if not co</u>	cation, or cancella ontained in the an	<u>tion of issued sha</u> iendment itself:	<u>res.</u>
(if not applicable, indicate N	/A)			
				·
				···
				
				
				

The date of each amendment(s) adoption:	<u>, , , , , , , , , , , , , , , , , , , </u>	9-6.19	if other than
date this document was signed.			
Effective date <u>if applicable</u> :		9-6-19	
	(no more than 90 days o	after amendment file date)	
Note: If the date inserted in this block does document's effective date on the Department	s not meet the applicable sta of State's records.	ntutory filing requirements, this	date will not be listed as
Adoption of Amendment(s) (C	CHECK ONE)		
The amendment(s) was/were adopted by the by the shareholders was/were sufficient for	ne shareholders. The numbe or approval.	r of votes cast for the amendmen	nt(s)
☐ The amendment(s) was/were approved by must be separately provided for each voti.	the shareholders through vot ng group entitled to vote sep	ing groups. The following state warately on the amendment(s):	ment
"The number of votes cast for the an			
by	oting group)	···	
(n	oting group)		
☐ The amendment(s) was/were adopted by the action was not required.	ne board of directors without	shareholder action and shareho	lder
☐ The amendment(s) was/were adopted by th action was not required.	ne incorporators without shar	eholder action and shareholder	
Dated	9-6-19 Jund	,	
Signature	J. W.		
(By a director, pro	esident or other officer – if d	irectors or officers have not bee	n
	corporator – if in the hands or ry by that fiduciary)	of a receiver, trustee, or other co	ourt .
	Die	en V. Ho	
	(Typed or printed name of	person signing)	
	,	President	
	(Title of persor	ı signing)	