P19000027209

(Ře	equestor's Name)	
(Ad	idress)	
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(Cit	ty/State/Zip/Phone	: #)
PICK-UP	MAIT	MAIL
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JUN 22 2019 I ALBRITTON

COVER LETTER

TO: Amendment Section	
Division of Corporations	
-+Da	ess _9/0_ inc.
NAME OF CORPORATION:	2.2.0
DOCUMENT NUMBER: V 190	0002+209
The enclosed Articles of Amendment and fee are :	submitted for filing.
Please return all correspondence concerning this n	natter to the following:
	Name of Contact Person
<u> </u>	Firm/ Company
EY	Press Jahn inc. Mul 12 St. Leyelahl & 33315 City/State and Zip Code
	Address
(123h	nu 12 st. Laurela 11 Ft 3331
	City/ State and Zip Code
- 15	ranger 96 & anail.
E-mail address: (to be	used for future annual report notification)
For further information concerning this matter, ple	rase rall:
Alter Ma	war Paris Cold O185
	Area Code & Daytime Telephone Number
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount mad	le payable to the Florida Department of State:
\$35 Filling Fee	□\$43.75 Filling Fee & □\$52.50 Filling Fee
Certificate of Status	
4.4.11.1	(Additional copy is Certified Copy
	enclosed) (Additional Copy
	is englosed)
Mailing Address	Street Address
Amendment Section	Amendment Section
Division of Cornarations	Division of Corporations

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



June 12, 2019

EXPRESS SALON INC 4236 NW 12 ST LAUDERHILL, FL 33313

SUBJECT: EXPRESS SALON INC Ref. Number: P19000027209

We have received your document for EXPRESS SALON INC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

Please check only 1(one) box.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton Regulatory Specialist II

Letter Number: 119A00011783

Articles of	Amendment
t	0
Articles of I	ncorporation
	if , " " " " " " " " " " " " " " " " " "
Expres Solon	Inc. 19 19
(Name of Corporation as curren	itly filed with the Florida Dept. of State)
P19000027209	Cy C
(Document Number	of Corporation (if known)
	- S
Pursuant to the provisions of section 607,1006, Florida Statutes, thi its Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporate "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or word "chartered," "professional association," or the abbreviation B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	"Co". A professional corporation name must contain the
C. Enter new mailing address, if applicable:	<u>333i3.</u>
(Mailing address MAY BE A POST OFFICE BOX)	4236 No 129. Landahill 6-1 33313
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address	<u>fress in Florida, enter the name of the</u>

Name of New Registered Agent

(Florida street address) New Registered Office Address: (City)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the o'digations of the position.

Signature of New Registered Agent, if chenying

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 = ChiefExecutive 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 marner. Currently John Doc 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 Edd.

Example:		•	in the transference.						
X Change	£Τ	<u>John D</u>	<u>0e</u>						
X Remove	<u>V</u>	Mike Jo	o <u>nes</u>						
<u>X</u> Add	<u>sv</u>	Sally S	<u>mith</u>						
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	1.10		<u>Addres</u> s			()
L) Change	R175	ident.	A.	ItLea,	<u> Manyo</u>	<u>a - C</u>	1236	NW 12	. J <i>y</i>
Add	V				•	Lave	tohil	10-1	
Remove							73913	.	
2) Change		_							
Add							······································		
Remove									
3) Change		_							
Add									
Remove							 		
4) Change			,_				·		
Add									
Remove									
5) Change									
Add					· •••		-	····	
Remove									
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6) Change		_				·			
Add									
Romano									

•	. (Be specific)	•		
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f an amendment provides for an exc provisions for implementing the am	hange, reclassifica endment if not con	tion, or cancellation o tained in the amendm	f issued shares, ent itself:	
f an amendment provides for an exc provisions for implementing the am (if not applicable, indicate N/A)	hange, reclassifica endment if not con	tion, or cancellation o tained in the amendm	f issued shares, ent itself:	
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The date of each amendment(s) adoption date this document was signed.	tion: 5 23/	19	, if other than the
Effective date if applicable:	5/23/1	G ajter amendment file date)	
Note: If the date inserted in this bloc document's effective date on the Depart		tatutory filing requirements, this date	e will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)		
☐ The amendment(s) was/were adopte by the shareholders was/were suffice		er of votes cast for the amendment(s))
. he amendment(s) was/were approx must be separately provided for each		oting groups. The following statement operately on the amendment(s):	nt
	the amendment(s) was/were suffice	cient for approval	
by	(voting group)	<u> </u>	
The amendment(s) was/were adopte action was not required.	d by the board of directors withou	at shareholder action and shareholder	r
The amendment(s) was/were adopte action was not required.	d by the incorporators without sha	areholder action and shareholder	
Dated	24/19.		
Signature	1		
(By a directed, by a directed, by		directors or officers have not been s of a receiver, trustee, or other court	
	Althea	Manyou.	
	(Typed or printed name o	of person signing)	
	12000	tent	
	Thile of period	on signing)	