P19000055132

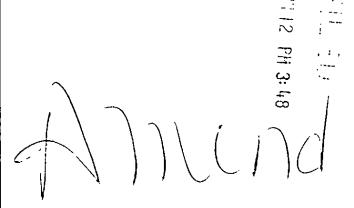
(Re	equestor's Name)	
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATI	SENSATIONS OF S		C.			
DOCUMENT NUMBER:	P19000055132					
The enclosed Articles of Ar		mitted for filing.				
Please return all correspond		-				
PIERRE SHOREK						
		(Name of Contact	Persor	1)		
SENSATIONS OF SUNNY	' ISLES, INC.					
		(Firm/ Compa	ıny)	_		
5161 NW 99TH LANE						
		(Address)				
CORAL SPRINGS FL 330	76					
		(City/ State and Zi	ip Cod	e)	, s	
PIERRE01@BELLSOUTF	LNET					
1	E-mail address: (to be use	d for future annual	report	notification	<u>n)</u>	
For further information con	cerning this matter, please	eall:				
PIERRE SHOREK			754	1	581-3611	
	(Name of Contact Persor				(Daytime Telephone Number)
Enclosed is a check for the	following amount made p	ayable to the Florid	la Depa	artment of	State:	
■ \$35 Filing Fee	☐S43.75 Filing Fee & Certificate of Status	□\$43.75 Filing For Certified Copy (Additional copenclosed)		Certifi Certifi	Filing Fee cate of Status ed Copy ional Copy is sed)	
Mailing .		<u>;</u>		Address		

Amendment Section Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment Articles of Incorporation οf

Art	icles of Amendment	
A	to cles of Incorporation	The same of the sa
Arti	of	
SENSATIONS OF SUNNY ISLES, INC.		
Name of Corporation as currently filed with the Florid	la Dept. of State)	
P19000055132		24
(Document Nu	mber of Corporation (if kno	 بين
Pursuant to the provisions of section 617.1006, Florida Sta	tutes, this Florida Not For	own) Profit Corporation adopts the following
amendment(s) to its Articles of Incorporation:		, ,
A. If amending name, enter the new name of the corpo	ration:	
		The const
name must be distinguishable and contain the word "corpo	oration" or "incorporated"	or the abbreviation "Corp," or "Inc."
"Company" or "Co." may not be used in the name.	•	
B. Enter new principal office address, if applicable:	5161 NW 99TH LANI	
(Principal office address <u>MUST BE A STREET ADDRE</u> .	<u>SS</u>) _{CORAL} SPRINGS FL	. 33076
		
C. Enter new mailing address, if applicable:		
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)		
	 -	
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office.		enter the name of the
	e marcan	
Name of New Registered Agent:		
		
New Registered Office Address:	(Flos	rida street address)
		274 - 1
	(City)	Florida (Zip Code)
	·	;y
New Registered Agent's Signature, if changing Register I hereby accept the appointment as registered agent. I am		he obligations of the position
tum	. jamina min am accept i	and the second s
	Signature of New Register	red 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: X Change X Remove X Add	<u>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith		
Type of Action (Check One)	Title	<u>N:</u>	<u>ame</u>	Address
1) Change Add	<u>S</u>	<u>SI</u>	HLOMO KAYAT	17100 COLLINS AVE #111 SUNNY ISLES BEACH FL 33160
× Remove				
2) Change Add				
Remove 3) Remove Add Remove				
4) Change Add				
Remove				
5) Change Add				
Remove				
6) Change Add		 -		
Remove				
E. If amending or additional sheet				
	<u>_</u>			
	_	_		
	<u>_</u> _			
	-			

		
-		
	, <u></u>	
		<u> </u>
		.
The date of each amendment(s) adoption: date this document was signed.		if other than the
Effective date if applicable:	10 more than 90 days after amendment file date)	
	not meet the applicable statutory filing requirements, this date will not be	listed as the
Adoption of Amendment(s) ((CHECK ONE)	
☐ The amendment(s) was/were adopted b was/were sufficient for approval.	by the members and the number of votes east for the amendment(s)	

Dated	JUNE 8, 2020
Signature	_ / est Mraule
	(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, or other court appointed fiduciary by that fiduciary)
	PIERRE SHOREK
	(Typed or printed name of person signing)

■ There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were