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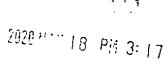
JUN - 5 2020

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: BELLA IMAGE A	ESTHETICS CORP	
DOCUMENT NUMB	ER: P20000009207		
	f Amendment and fee are sul	bmitted for filing.	
Please return all corresp	ondence concerning this ma	tter to the following:	
	STACY L RODRIGUEZ ,M:	SN ARNP	
-	 -	Name of Contact Persor	. <u>. </u>
	BELLA IMAGE AESTHETI	CS CORP	
-		Firm/ Company	
	5711 SUNSET FALLS DR	cop=.,	
-	-	Address	
	APOLLO BEACH FL. 33572	2	
•		City/ State and Zip Code	2
	BALLAIMAGEMEDSPA@	GMAIL.COM	
-	E-mail address: (to be us	sed for future annual report	notification)
For further information	concerning this matter, please	se call:	455-3558
Name o	f Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:
S35 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)
Ame Divis P.O.	ing Address ndment Section tion of Corporations Box 6327 hassee, FL 32314	Ameno Divisio The C 2415 I	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303

Articles of Amendment to Articles of Incorporation of



BELLAN IMAGE AESTHETICS CORP

(Name of Corporation	as currently filed with the Florida Dept. of State)
P20000009207	
(Documen	nt Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida St its Articles of Incorporation:	tatutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corp	ooration:
BELLA IMAGE AESTHETICS CORP	The new
	poration," "company," or "incorporated" or the abbreviation "Corp.," or "Co". A professional corporation name must contain the word ation "P.A."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRE	<u>ESS</u>)
	
C. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	· · · · · · · · · · · · · · · · · · ·
D. If amending the registered agent and/or registered new registered agent and/or the new registered off	
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	. Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Regist	tered Agent: am familiar with and accept the obligations of the position.
Thereby accept the appointment as registered agent. The	im jumilia wan and accept the obligations of the position.
Signatu	ure of New Registered Agent, if changing
Зідлин	are by their registered righting graniging

Check if applicable

☐ 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> <u>Joh</u>	nn Doe	
X Remove	<u>V</u> <u>Mi</u>	ke Jones	
X Add	<u>SV</u> <u>Sal</u>	lly Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) X Change	<u> </u>	STACY I. RODRIGUEZ	5711 SUNSET FALLS DRIVE
Add			APOLLO BEACH, FL. 33572
Remove			
2) Change			<u> </u>
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add	- 	•	
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

amending or adding additional Article	s, enter chang	e(s) here:			
ttach additional sheets, if necessary). (Be specific)				
			<u> </u>		
					13 - 1-
					
				<u> </u>	
				·	
			<u>.</u>		
				_	
	-			-	
an amendment provides for an exchan	ge, reclassific	ation, or cance	llation of issu	ed shares,	
rovisions for implementing the amend (if not applicable, indicate N/A)	ment if not co	ntained in the	<u>amendment i</u>	tseil:	
(if not applicable, material 1971)					
				<u> </u>	
			<u>.</u>		
		_			
					

-	MARCH 04, 2020	
The date of each amendment(s) :	doption:	, if other than th
date this document was signed.		
	ARCH 04, 2020	
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file o	tate)
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing requires epartment of State's records.	ments, this date will not be listed as th
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ac action was not required.	opted by the incorporators, or board of directors without sha	areholder action and shareholder
☐ The amendment(s) was/were ac by the shareholders was/were	opted by the shareholders. The number of votes cast for the ufficient for approval.	e amendment(s)
	proved by the shareholders through voting groups. The folion reach voting group entitled to vote separately on the amend	
"The number of votes cas	t for the amendment(s) was/were sufficient for approval	
by		
,	(voting group)	
03/04/203	0	
Dated		
Signature	to all Police	
Signature/	director, president or other officer if directors or officers h	nave not been
	ed, by an incorporator – if in the hands of a receiver, trustee	
	nted fiduciary by that fiduciary)	,
	STACY L RODRIGUEZ	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	