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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: 3465+ 3	2 Beauty Inc.	
DOCUMENT NUMBER: <u>P2000022</u>	967	
The enclosed Articles of Amendment and fee are sul	bmitted for filing.	
Please return all correspondence concerning this mat	tter to the following:	
Michelle Ma	Name of Contact Person	
Beast 2 Beau	Firm/ Company	
4110 NW 2nd A	Address	
Beca Raton	City/ State and Zip Code	
E-mail address: (to be us	enticularinal training - com sed for future annual report notification)	
For further information concerning this matter, pleas	se call:	
Michelle Martiya Name of Contact Person	at (954) 478-2212 Area Code & Daytime Telephone Number = 1	2022 AUS
Enclosed is a check for the following amount made p	payable to the Florida Department of State:	<u>8</u> 20
\$35 Filing Fee	S43.75 Filing Fee & S52.50 Filing Fee Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed)	P1: 3: 29
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street. Suite 810 Tallahassee, FL 32303	

Articles of Amendment to Articles of Incorporation of

$\alpha = 1 \cdot \pi$	10		
(Name of Corner	ration as currently filed	with the Florida Dept. of State)
		WANTE CHANGE DOOR OF CAUSE	,
P2000002	<u> 2964</u> cument Number of Corpor	ration (if known)	
`	·		
Pursuant to the provisions of section 607,1006, Flo its Articles of Incorporation:	orida Statutes, this <i>Florida</i>	Profit Corporation adopts the f	ollowing amendment(s) to
A. If amending name, enter the new name of th	e corporation:		
Essential Animal	Tomana J	Mr.	The new
name must be distinguishable and contain the word "Inc.," or Co.," or the designation "Corp," "h "chartered," "professional association," or the ab	"corporation," "compan nc," or "Co". A profes	y," or "incorporated" or the abi	breviation "Corp.,"
B. Enter new principal office address, if applica (Principal office address MUST BE A STREET A			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	<u>BOX</u>)		
D. If amending the registered agent and/or regi		Florida, enter the name of the	20
new registered agent and/or the new register	red office address:		123 123
Name of New Registered Agent	 		-
			
	(Florida street addr	'ess)	<u>ਦ</u> ੂਹ
New Registered Office Address:		, Florida	
	(City)		(Zip Code)
New Registered Agent's Signature, if changing land the changing land the la	<mark>Registered Agent:</mark> u. I am familiar with and	A accept the obligations of the p	osition.
<u> </u>	ignature of New Registere	ed Avent if changing	
.5.	ignature of trew negisters	a agen, y enanging	
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>	John Doe	
X Remove	Υ	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
I) Change			
Add			
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

f an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	of issued shares, ment itself:
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(if not applicable, indicate N/A)	

The date of each amendment(s) adoption:, if other than the late this document was signed.
Effective date <u>if applicable</u> : (no more than 90 days after amendment file date)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the locument's effective date on the Department of State's records.
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):
"The number of votes cast for the amendment(s) was/were sufficient for approval
by" (voting group)
(voting group)
Dated August 13, 2022
Signature M. March
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
(Typed or printed name of person signing)
(Title of person signing)