P20000040772

(Red	questor's Name)	
(Add	iress)	
(Add	lress)	
(City	/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bus	iness Entity Nar	me)
(,
(Doc	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to F	- Filing Officer:	
		}

Office Use Only



200356802532

01/05/21--01020--008 **43.75

771.111-5 1111:5

Munichs

FEB 1 4 2021 I ALBRITTON

COVER LETTER

O: Amendment Section

Division of Corporations NAME OF CORPORATION: DOCUMENT NUMBER: _ The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: F-mail address (to be used for future annual report notification) (1) For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: LX\$43.75 Filling Fee & □\$52.50 Filing Fee □\$43.75 Filing Fee & ☐ \$35 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Street Address Mailing Address Amendment Section Amendment Section Division of Corporations Division of Corporations The Centre of Tallahassee P.O. Box 6327

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment

to

Articles of Incorporation

Hairtrendz 4 (1 7	Incorporated
(Name of Corporation as currently filed	with the Florida Dept. of State)
P 2 0000040772	
(Document Number of Corpo	ration (if known)
ursuant to the provisions of section 607,1006, Florida Statutes, this <i>Florida</i> s Articles of Incorporation:	Profit Corporation adopts the following amendment(s)
If amending name, enter the new name of the corporation: Righteous Development Income ame must be distinguishable and contain the word "corporation." "company Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional association," or the abbreviation "P.A."	y," or "incorporated" or the abbreviation "Corp.,"
. Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS)	
	r.5
	• ;
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1
	Y

	1
. If amending the registered agent and/or registered office address in lew registered agent and/or the new registered office address:	Florida, enter the name of the
Name of New Registered Agent	·
(Florida street addre	ess)
	Florida
New Registered Office Address:	1101100

Signature of New Registered Agent, if changing

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.

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>	Name	<u>Addres</u> s
1) Change	-		
Add			
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			A
5) Change		<u> </u>	
Add			
Remove			
6) Change			
Add			
Remove			

	heets, if necessary).	. (Be specific)			
					
					
·· ·· ·· ··	······································			•	
· · · · · · · · · · · · · · · · · · ·				 	
			<u></u>		<u>-</u>
					
					
			ation, or cancellati	on or issued snares	1
an amendment p	provides for an exc	change, reclassifica	ntained in the ame	ndmont itself:	
provisions for imp	plementing the an	change, reclassifica nendment if not con	ntained in the ame	ndment itself:	
provisions for imp	provides for an exc plementing the an oble, indicate N/A)	change, reclassifica pendment if not con	ntained in the ame	ndment itself:	
provisions for imp	plementing the an	change, reclassifica nendment if not con	ntained in the ame	ndment itself:	
provisions for imp	plementing the an	change, reclassification	ntained in the ame	ndment itself:	
provisions for imp	plementing the an	change, reclassification	ntained in the ame	ndment itself:	
provisions for imp	plementing the an	change, reclassification	ntained in the ame	ndment itself:	
provisions for imp	plementing the an	change, reclassification	ntained in the ame	ndment itself:	
provisions for imp	plementing the an	change, reclassification	ntained in the ame	ndment itself:	
provisions for imp	plementing the an	change, reclassification	ntained in the ame	ndment itself:	
provisions for imp	plementing the an	change, reclassification	ntained in the ame	ndment itself:	
provisions for imp	plementing the an	change, reclassification	ntained in the ame	ndment itself:	
provisions for imp	plementing the an	change, reclassification	ntained in the ame	ndment itself:	
provisions for imp	plementing the an	change, reclassification	ntained in the ame	ndment itself:	
provisions for imp	plementing the an	change, reclassification	ntained in the ame	ndment itself:	

. .

The date of each amendment(s) adoption:date this document was signed.	<u>December</u>	<u> 21,2020</u>	, if other than the
Effective date <u>if applicable</u> : (1	De Cembe	amendment file date)	
Note: If the date inserted in this block does not a document's effective date on the Department of Sta		ory filing requirements, this dat	te will not be listed as the
Adoption of Amendment(s) (CHEC	<u>CK ONE</u>)		
The amendment(s) was/were adopted by the incaction was not required.	corporators, or board of dire	ectors without shareholder actic	on and shareholder
☐ The amendment(s) was/were adopted by the shareholders was/were sufficient for app		votes cast for the amendment(s	5)
☐ The amendment(s) was/were approved by the sl must be separately provided for each voting gr			ent
"The number of votes cast for the amendr	ment(s) was/were sufficient	for approval	
by(voting	group)		
Dated			
· • • • • • • • • • • • • • • • • • • •	orator – if in the hands of a	tors or officers have not been receiver, trustee, or other coun	
	DSanna S.P. ped or printed name of per	erre son signing)	
——————————————————————————————————————	tle of person signing);	Preside	nt
		I .	