Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : SOSME ACCOUNTING & TAX SERVICES LLC

Account Number : I20200000102 Phone

: (954)998-1035 Fax Number : (954)573-1480

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:_

COR AMND/RESTATE/CORRECT OR O/D RESIGN NANO LASH INC

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Corporate Filing Menu

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORP	PORATION: NANO LASH IN	C	
DOCUMENT NU	331000013136		
The enclosed Article	les of Amendment and fee are s	uhmitted for filing.	
Please return all con	rrespondence concerning this m	atter to the following:	
	YTYIMA MEDINA GONZ	ALEZ	
		Name of Contact Perso	on .
	NANO LASH INC		
		Firm/ Company	
	4712 NW 107TH AVE AP1		
		Address	
	DORAL FL 33178		**
		City/ State and Zip Coc	le
	nanolashinc@gmail.com		
	E-mail address: (to be u	sed for future annual report	I notification)
	•		
For further informat	ion concerning this matter, plea	se call:	
YIYIMA MEDINA		786	389-0670
Name	e of Contact Person	Area Co	389-0670 de & Daytime Telephone Number
Enclosed is a check	for the following amount made		
■ \$35 Filing Fcc	□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
An Di P.C	niling Address nendment Section vision of Corporations D. Box 6327 Hahassee, FL 32314	Amend Divisio The Ce	Address Iment Section In of Corporations Entire of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

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Articles of Amendment to Articles of Incorporation of

NANO LASII INC	
(Name of Corporation as curren P21000027175	tly filed with the Florida Dept. of State)
	of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, this its Articles of Incorporation	,
A. If amending name, enter the new name of the corporation:	
name must he distinguishable and contain the word "corporation," " "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". "chartered," "professional association," or the abbreviation "P.A.	A professional corporation name must contain the word
B. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADDRESS</u>)	4712 NW 107TH AVE APT 404
	DORAL FL 33178
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	4712 NW 107TH AVE APT 404
	DORAL FL 33178
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address	ress in Florida, enter the name of the
Name of New Registered Agent	
(Florida sti	rect address)
New Registered Office Address:	[florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent hereby accept the appointment as registered agent. I am familiar v	i with and accept the obligations of the position.
Signature of New R	rgistered Agent, if changing

Check if applicable

The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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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:

 $P \sim President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO - Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.$

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 Doc	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u> Title</u>	Name	Address
I) X Change	P	YIYIMA MEDINA GONZALEZ	4712 NW 107TH AVE APT 404
Add			DORAL FL 33178 (52)
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4)Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			And
Add			
Remove			

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If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)	
	
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an amondment monthly for any later to the second	
an amendment provides for an exchange, reclassification, or cancellation of i	soud shares, it itself
(if not applicable, indicate N/A)	
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date this document was signed.	udoption:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bedocument's offeotive date on the De	black does not ment the amplicate	is date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were add action was not required.	opted by the incorporators, or board of directors without shareholder	action and shareholder
The amendment(s) was/were ado by the shareholders was/were su	opted by the shareholders. The number of votes east for the amendmental for approval.	ent(s)
The amendment(s) was/were app must be separately provided for	toved by the shareholders through voting groups. The following state each voting group entitled to vote separately on the amendment(s):	ement
	for the amendment(s) was/were sufficient for approval	·
by		
	(voting group)	- :
08/14/2023 Dated		••
	0.0	
Signature	the land	<u>ئ</u> يز.
Signature (By a dire selected,	ector, president or other officer - if directors or officers have not bee by an incorporator - if in the hands of a receiver, trustee, or other co d fiduciary by that fiduciary)	
Signature (By a directed, appointed)	13 an incorporation to the Bands of a recover two to the state	
Signature (By a directed, appointed)	d fiduciary by that fiduciary)	
Signature(By a directed, appointed	d fiduciary by that fiduciary) (IYIMA MEDINA GONZALEZ	