P21000039133

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TO: Amendment Section

Division of Corporations * •

NAME OF CORPORA	_{TION:} BEAUTY	SECRET SPA INC	
DOCUMENT NUMBER	p ²	21000039133	
The enclosed Articles of	Amendment and fee are su	abmitted for filing.	
Please return all correspo	ndence concerning this ma	atter to the following:	
	VALE	RIE L. RAPHAEL, ESQ.	
		Name of Contact Person	
•	KI	EMET LAW GROUP	
_		Firm/ Company	
		P.O. BOX 19187	
Address			
PLANTATION, FL 33318			
_	<u> </u>	City/ State and Zip Code	
	KLG@k	KEMETLAWGROUP.COM	
_		sed for future annual report notification)	
	oncerning this matter, plea	se call: at (561) 870-0605	
Name of C	Contact Person	Area Code & Daytime Telephone Number	
Enclosed is a check for th	ne following amount made	payable to the Florida Department of State:	
\$35 Filling Fee	□\$43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee & ☐\$52.50 Filing Fee Certified Copy (Additional copy is enclosed) ☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
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 Articles of Incorporation

FIL.ED

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BEAUTY SECRET SPAINC.

(Name of Corporation as currently filed with the Florida Dept. of State) = 10-R / Of STATE
TALLAHASSEE, FL

P21000039133

(Document Number of Corporation (if known)

N/A			The ne
une must be distinguishable and contain the word "corp Inc.," or Co.," or the designation "Corp," "Inc," hartered," "professional association," or the abbrevi	or "Co". A professional corporation		
. <u>Enter new principal office address, if applicable:</u> Principal office address <u>MUST BE A STREET ADDR</u>	N/A	-	
. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>	N/A		
. If amending the registered agent and/or registere new registered agent and/or the new registered of		name of the	
Name of New Registered Agent	IRAIDA CRESPO TAVIO		
11;	98 W FLAGLER STE #20	9	
	(Florida street address)		
New Registered Office Address:	MIAMI (City)		33174 (Zip Code)
ew Registered Agent's Signature, if changing Regis			·

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)

Example:

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> 17 </u>	John Doe	
X Remove	V	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	P	DAMARIS PACHECO VIDERA	11398 W FLAGLER STE #209
Add			MIAMI, FL 33174
Remove 2) Change	P	IRAIDA CRESPO TAVIO	11398 W FLAGLER STE #209 MIAMI, FL 33174
X Add Remove Change Add		<u> </u>	
Remove 4) Change Add			
Remove 5) Change Add			
Remove 6) Change Add			
Remove			

	ing additional Art ects, if necessary).	(Be specific)	ets) nere.		
N/A					
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		<u> </u>		<u> </u>	
					
				<u> </u>	<u>-</u>
If an amendment pr provisions for impl	<u>ovides for an excl</u>	<u>nange, reclassifica</u>	ition, or cancellat	ion of issued shar	es,
(if not applicable	le, indicate N/A)	nument in more con	reamed in the am	chament itsen.	
. , ,					
N/A					
N/A					

The date of each am date this document w	endment(s) adoption:as signed.	, if other than the
Effective date if app	ficable:	e date)
Note: If the date ins document's effective	serted in this block does not meet the applicable statutory filing requidate on the Department of State's records.	rements, this date will not be listed as the
Adoption of Amend	ment(s) (<u>CHECK ONE</u>)	
X The amendment(s action was not req) was/were adopted by the incorporators, or board of directors without uired.	shareholder action and shareholder
) was/were adopted by the shareholders. The number of votes east for t rs was/were sufficient for approval.	the amendment(s)
) was/were approved by the shareholders through voting groups. The fa w provided for each voting group entitled to vote separately on the ame	
"The numbe	r of votes east for the amendment(s) was/were sufficient for approval	
by	N/A	
	(voting group)	
Dat •		
Sig	nature (By a director, president or other officer – if directors or officers	Programma have
	selected, by an incorporator – if in the hands of a receiver, truste appointed fiduciary by that fiduciary)	e, or other court
	DAMARIS PACHECO VIDERA	\
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	-