## P21000064557

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SUCRETARY OF STATE AND ASSESSED IN THE PROPERTY OF STATE AND ASSESSED IN THE PRO

## COVER LETTER

**TO:** Amendment Section Division of Corporations

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NAME OF CORPO	RATION: South Florida Bart	oer College Inc.			
DOCUMENT NUM	BER: P21000064557				
The enclosed Articles	s of Amendment and fee are su	bmitted for filing.			
Please return all corre	espondence concerning this ma	tter to the following:			
	Albert Eiras				
	Name of Contact Person				
		Firm/ Company	<del> </del>		
	3040 NE 41st Terrace				
	Homestead, FL 33033	Address			
		City/ State and Zip Code			
	alberteiras@gmail.com				
	E-mail address: (to be us	sed for future annual report	notification)		
For further information	on concerning this matter, pleas	se call:			
Albert Eiras		at (	) 505-0813 de & Daytime Telephone Number		
Name	of Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check f	or the following amount made	payable to the Florida Depa	artment of State;		
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
An Div P.C	niling Address nendment Section vision of Corporations D. Box 6327 lahassee, FL 32314	Amend Divisio The Ce	Address ment Section n of Corporations entre of Tallahassee N. Monroe Street, Suite 810		

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

FILED

South Florida Barber College Inc.

2022 JAN 25 PH 12: 30

(Name of Corporation as current	ly filed with the Florida Deptiof State RY OF CALL	
P21000064557	TALEAHASSEELFE	
(Document Number of	of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to	
A. If amending name, enter the new name of the corporation:		
South Florida Barber Schools Inc	The new	
name must be distinguishable and contain the word "corporation," " "Inc.," or Co.," or the designation "Corp," "Inc," or "Co" "chartered," "professional association," or the abbreviation "P.A.	'company," or "incorporated" or the abbreviation "Corp.," A professional corporation name must contain the word	
B. Enter new principal office address, if applicable:	234-236 N Krome Avenue	
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	Homestead FL 33030	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	234-236 N Krome Avenue	
	Homestead FL 33030	
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address		
Name of New Registered Agent		
	rect address)	
New Registered Office Address: 234-234 N.	KRome Ave Florida 33030 (City) (Zip Code)	
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar		
Signature of New F	Registered Agent, if changing	
Check if applicable	Walter Committee	

□ 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 Doc			
X Remove	<u>v</u>	Mike Jones			
_ <u>X</u> Add	_ <u>SV</u>	Sally Smith			
Type of Action (Check One)	<u>Title</u>	Name		<u>Addres</u> s	
1) Change					
Add					. <u></u>
Remove					
2) Change					
Add					
Remove 3) Change		_			
Add					
Remove					
4) Change					
Add	<del></del>	<del></del>		<del> </del>	
Remove					
5) Change		_			
Add					
Remove					•
6) Change					
Add			-		
Remove					

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)	
Amended Corporation Name and address only.	
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F. If 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)	
<del></del>	
	<del></del> -

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• •	1/20/2022		
The date of each amendment(s) adoption date this document was signed.	:		, if other than
Effective date <u>if applicable</u> :	-		
	(no more than 90 day	es after amendment file date)	
Note: If the date inserted in this block do document's effective date on the Department		statutory filing requirements, this date	will not be listed as
Adoption of Amendment(s)	(CHECK ONE)		
The amendment(s) was/were adopted by action was not required.	the incorporators, or board	of directors without shareholder action	and shareholder
☐ The amendment(s) was/were adopted by by the shareholders was/were sufficient		nber of votes cast for the amendment(s)	
The amendment(s) was/were approved b must be separately provided for each va			t
"The number of votes cast for the	, ·	••	
bv			
	(voting group)		
January 20, 2022			
Dated		- 1	
Signature			
(By a director,	president or other officer -	if directors or officers have not been	
selected, by an	incorporator - if in the han	ds of a receiver, trustee, or other court	
appointed fidu	ciary by that fiduciary)		
	(Typed or printed name	ras	
	(Typed or printed name	of person signing)	
	Director		
<del></del>	(Title of person signing	)	

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