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Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:		
Division of Corporations		
Fax Number : (850)617-6380		
From:		
Account Name : LICENSES & PERMITS LLC		
Account Number : 120210000155		
Phone : (305)226-8727 Fax Number : (305)226-8767		
Enter the email address for this business entity annual report mailings. Enter only one email Email Address:	to be used for fut address please.	ure C
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COVER LETTER

TO: Amendment Section **Division of Corporations**

NAME OF CORPORATION: _ HOLY SPA CORP

P21000074169 DOCUMENT NUMBER:

The enclosed Articles of Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

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LUCIA ESTRELLA

Name of Contact Person

LICENSES & PERMITS LLC

Firm/ Company

8300 WEST FLAGLER STREET SUITE 114 Address

MIAMI, FLORIDA 33144

City/ State and Zip Code

ACRUZ.ACCURATE@GMAIL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

LUCIA ESTRELLA

Name of Contact Person

226**-8**727

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

S35 Filing Fee

□\$43.75 Filing Fee & Certificate of Status

□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)

at (_____

\$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

(FAX)

Articles of Amendment to Articles of Incorporation of

HOLY SPA CORP

(Name of Corporation as currently filed with the Florida Dept, of State)

P21000074169

(Document Number of Corporation (if known)

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

HOLY BEAUTY & SPA CORP

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

B.	Enter new princip	pal office address, if applicable:	
		ress MUST BE A STREET ADDRESS)

C.	Enter new mailing address, if applicable; (Mailing address <u>MAY BE A POST OFF</u>			022113	
				1	
D,	If amending the registered agent and/or r new registered agent and/or the new regis	egistered office address in Florida, enter the name of stered office address:	of the	S S S	· .
	Name of New Registered Agent			-	
		(Florida street address)			
	New Registered Office Address:	, Flo	orida (Zlp C		

New Registered Agent's Signature, if changing Registered Agent;

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

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. Example:

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	Address	
1) Change	. <u> </u>	·		<u>ل</u> الم
Add				
Remove				
2) Change		• <u>•</u>		
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Remove 3) Change				
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4) Change				
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E. If <u>amending or adding additional Articles</u>, <u>enter change(s) here</u>: (Attach additional sheets, if necessary). (Be specific)

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A BE AUCHUMENT Provides for an exchange, reclassification, or cancellation of issued shares,	
provisions for implementing the smendment if not contained in the amendment ltself:	
<u>If an amendment provides for an exchange, reclassification, or cancellation of issued shares,</u> provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	ې د ا
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/A	
/A	
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03/09/2022 00:59		(FAX)	P.00
The date of each amendment(s) a date this document was signed.	03/09/2022 adoption:		, if other 1
03/ Effective date <u>if applicable</u> :	(no more than 90 days	after amendment file date)	
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable st	,	date will not be listed
Adoption of Amendment(s)	(CHECK ONE)		
The amendment(s) was/were ad action was not required.	opted by the incorporators, or board o	f directors without shareholder ac	tion and shareholder
The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The numb ufficient for approval.	er of votes cast for the amendmen	it(s)
The amendment(s) was/were ap must be separately provided for	proved by the shareholders through vor each voting group entitled to vote sep	oting groups. The following states parately on the amendment(s):	2022 H
"The number of votes cash	for the amendment(s) was/were suffic	cient for approval	6- ²¹
by	(voting group)	м ,,	
03/09/2022 Dated		\frown	, के के के
Signature(By a d	trector, president or otherhofficer - if o	directors or officers have not been	<u> </u>
selecte appoin	d, by an incorporator – if in the hands ted fiduciary by that fiduciary)	of a receiver, trustee, or other cou	urt
	LIUDA GARCIA		
	(Typed or printed name of PRESIDENT	person signing)	
	(Title of person signing)		