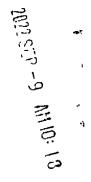
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Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				





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Manie ('n? TALLAHASSEE FLORIDA

RECEIVED 2021 SEP -8 PMI2: 50

SEP 1 0 2021 I ALBRITTON

## .CORPORATE

When you need ACCESS to the world

ACCESS,

INC.

236 East 6th Avenue. Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

#### WALK IN

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#### FLORIDA DEPARTMENT OF STATE Division of Corporations

September 9, 2021

CORPORATE ACCESS, INC.

SUBJECT: SPIKE BEAUTY BAR CORP

Ref. Number: P21000077649

We have received your document for SPIKE BEAUTY BAR CORP and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

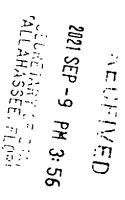
Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton Regulatory Specialist III

Letter Number: 121A00021712

Corrected



### Articles of Amendment Articles of Incorporation

	of		
SPIKE BEAUTY BAR CORP			
(Name of Corpo	oration as currently filed with the Flori	da Dept. of State)	
P21000077649			
(D	Occument Number of Corporation (if know	vn)	<del></del>
Pursuant to the provisions of section 607,1006, Flits Articles of Incorporation:	lorida Statutes, this <i>Florida Profit Corpor</i>	ration adopts the fo	ollowing amendme
A. If amending name, enter the new name of t	the corporation:		
SPIKED BEAUTY BAR CORP			The new
name must be distinguishable and contain the wor "Inc.," or Co.," or the designation "Corp," " "chartered," "professional association," or the a	"Inc," or "Co". A professional corpor	ation name must	eviation Corp., contain the word
B. Enter new principal office address, if applic Principal office address <u>MUST BE A STREET</u>	<u>cable:</u> ADDRESS )		
C. Enter new mailing address, if applicable:	<del></del>		202
(Mailing address MAY BE A POST OFFICE	<u></u>		7022 S.EP
			<del></del>
D. If amending the registered agent and/or reg new registered agent and/or the new registe	zistered office address in Florida, enter ered office address:	the name of the	11.10:1
Name of New Registered Agent			<b>ූ</b>
	(Florida street address)		
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
New Registered Office Address:	(City)	, Florida	

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, nam 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 = Executive Officer: CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office 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. The 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	PT	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				
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5) Change				
Add				
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бі Change			<u>.</u>	
Add				
Remove				

Attach additional sheets, if necessary). (Be specific)	
	<del></del>
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20 amendment provides for an exchange realistification of	
an amendment provides for an exchange, reclassification, or ca provisions for implementing the amendment if not contained in	Incenation of issued shares, the amendment itself:
(if not applicable, indicate N/A)	The state of the s
<del></del>	

	option:	, if other that
date this document was signed.		
Effective date if applicable:		
	íno more than 90 days after an	endment file date)
Note: If the date inserted in this bl document's effective date on the De		filing requirements, this date will not be listed a
Adoption of Amendment(s)	(CHECK ONE)	
x The amendment(s) was/were ado action was not required.	pted by the incorporators, or board of directo	ors without shareholder action and shareholder
☐ The amendment(s) was/were ador by the shareholders was/were sufficiently.	pted by the shareholders. The number of vo	tes cast for the amendment(s)
	oved by the shareholders through voting greath voting group entitled to vote separately	
"The number of votes cast f	or the amendment(s) was/were sufficient for	r approval
by		
	(voting group)	
09/08/2021 Dated		
Signature	Jennifer A. Jime	ne z
selected	ector, president or other officer – if director, by an incorporator – if in the hands of a reced fiduciary by that fiduciary)	
Į	ENNIFER A JIMENEZ	
-	(Typed or printed name of person	signing)
_	President	
	(Title of person signing)	