P21000094823

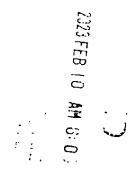
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2 - 2023

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: LUX BEAUTY SA	ALON INC			
DOCUMENT NUMI					
	of Amendment and fee are su	bmitted for filing.			
Please return all corre	spondence concerning this ma	tter to the following:			
	MAIRA CARRANZA MOR	EJON			
	Name of Contact Person				
		Firm/ Company			
	3030 NW 15TH ST				
		Address			
	MIAMI, FL 33125				
		City/ State and Zip Code	2		
	MAIRACARRANZA@YAH	OO.ES			
	E-mail address: (to be us	ed for future annual report	notification)		
For further information	n concerning this matter, pleas	se call:			
MAIRA CARRANZA		786 at (de & Daytime Telephone Number		
Name o	of Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	artment of State:		
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Amo Divi	ling Address endment Section sion of Corporations Box 6327	Ameлd Divisio	Address Iment Section on of Corporations entre of Tallahassee		
Tall	ahassee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			

Articles of Amendment to Articles of Incorporation of

2022 550

LUX BEAUTY SALON INC			5052 LEB 1 (AM Sin-
(<u>Name</u>	of Corporation as	s currently filed with the Flo	orida Dept. of State)	
P21000094823			* <u>-</u> -	
	(Document l	Number of Corporation (if kn	own)	
Pursuant to the provisions of section 607 ts Articles of Incorporation:	.1006, Florida Stat	tutes, this <i>Florida Profit Corp</i>	poration adopts the follow	wing amendment(s)
. If amending name, enter the new n	ame of the corpoi	ration:		
ame must be distinguishable and contain Inc.," or Co.," or the designation "C chartered." "professional association,"	Corp," "Inc," or	"Co" A professional corp		
charterea. projessional association,	or the unoreviate	on T.A.		
B. Enter new principal office address, Principal office address MUST BE A S				
Tincipul office address BIOST BE A S	TREET ADDRES	<u> </u>		
Enter new mailing address, if appl				
(Mailing address MAY BE A POST	OFFICE BOX)			
		 -		
 If amending the registered agent an new registered agent and/or the ne 			er the name of the	
•	•	OREJON, MAIRA		
Name of New Registered Agent				
	380 E 9TH STRE	EET, SUITE 4		
	(Florida street address)		
New Registered Office Address:	HIALEAH		33010 , Florida	D
		(City)		lip Code)
New Registered Agent's Signature, if of the hereby accept the appointment as regis	tereWavent Lam	ed Agent: familiar with and accent the	ahlivations of the positic)n
weres, accept the appointment as regin	///	Jamilia Will and Woodpi mo	oongoo oy tae pootao	
	//			
<i>M</i>	<u>/</u>			
	Signature	of New Registered Agent, if o	changing	
Check if applicable				

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	PT	John De	<u>ne</u>	
X Remove	<u>v</u>	Mike Jo	<u>ones</u>	
X Add	<u>SV</u>	Sally Si	mith_	
Type of Action (Check One)	Title		Name	Address
1) Change	P	_	DIANELIS M ESTRADA CHAVIAI	380 E 9TH STREET STE 4
Add				
X Remove				HIALEAH, FL 33010
2) Change	P		CARRANZA MOREJON, MAIRA	380 E 9TH STREET
X Add				STE 4
Remove 3) Change				HIALEAH, FL 33125
Add				
Remove				
4) Change			***	
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change	<u> </u>	_		
Add				
Remove				

	(Be specific)
·	

	1 . 15
f an amendment provides for an excha	ange, reclassification, or cancellation of issued shares,
provisions for implementing the amer	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
f an amendment provides for an exchaprovisions for implementing the amen (if not applicable, indicate N/A)	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
provisions for implementing the amer	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
provisions for implementing the amer	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
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provisions for implementing the amer	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
provisions for implementing the amer	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:

•

	12/16/2022	
The date of each amendment(s) ac	option:	, if other than the
date this document was signed.		
	5/2022	
Effective date <u>if applicable</u> :	4 001 6 1 (61.1.1	<u> </u>
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this be document's effective date on the De	ock does not meet the applicable statutory filing requirements, t partment of State's records.	his date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were ado action was not required.	pted by the incorporators, or board of directors without shareholde	er action and shareholder
☐ The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes east for the amend fficient for approval.	ment(s)
must be separately provided for	roved by the shareholders through voting groups. The following seach voting group entitled to vote separately on the amendment(s) for the amendment(s) was/were sufficient for approval	
	of the amendment(s) was were sufficient for approval	
by	(voting group)	
12/16/2022 Dated		
	rector president or other officer – if directors or officers have not, by an incorporator – if in the hands of a receiver, trustee, or other	
	ed fiduciary by that fiduciary)	
	MAIRA CARRANZA MOREJON	
•	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	

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