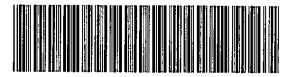
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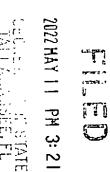
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Office Use Only



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PRODUCT STATES



4 5/13/2022

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	CAREILA ISABEI	.MAKEUPINC	
DOCUMENT NUMB	P22000006052 ER:		
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.	
Please return all corresp	ondence concerning this ma	tter to the following:	
!	SABELLA GUIDOTTI		
- i	GBOOKS LLC	Name of Contact Person	1
-	800 NW 107TH CT, UNIT 2	Firm/ Company 204	
-	ORAL, FL 33178	Address	
- ! -	SABELLA@IGBOOKS.NE E-mail address: (to be us	City/ State and Zip Cod T ed for future annual report	
For further information	concerning this matter, pleas	se call:	
ISABELLA GUIDOTT	ï	786 at (877-5384)
Name o	Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:
\$35 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)
Amer Divis P.O. 1	ng Address adment Section ion of Corporations Box 6327 nassee, FL 32314	Amend Division The Co 2415 I	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 ussee, FL 32303



FLORIDA DEPARTMENT OF STATE Division of Corporations

March 22, 2022

CARELIA MORENO 535 NW 126 STREET NORTH MIAMI, FL 33168

SUBJECT: CAREILA ISABEL MAKEUP INC

Ref. Number: P22000006052

We have received your document for CAREILA ISABEL MAKEUP INC, however, upon receipt of your document no check was enclosed. Please return your document along with a check or money order made payable to the Department of State for \$35.00.

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.

Letter Number: 522A00006721

Claretha Golden Regulatory Specialist II

www.sunbiz.org

Articles of Amendment to Articles of Incorporation of

FILED

CAREILA ISABEL MAKEUP INC		2022 44	
(Name of Corpora	ation as currently filed with the Florida	2022 MAY Dept. of State	PH 3: 2
P22000006052		SECIL	on STATE
(Doc	cument Number of Corporation (if known)	, ALLAINE	SEE, FL
Pursuant to the provisions of section 607.1006, Flor its Articles of Incorporation:	rida Statutes, this <i>Florida Profit Corporati</i>	lon adopts the following	amendment(s
A. If amending name, enter the new name of the	e corporation:		
CARELIA ISABEL MAKEUP INC			Th
name must be distinguishable and contain the word "Inc.," or Co.," or the designation "Corp," "In "chartered," "professional association," or the abl	nc," or "Co". A professional corporati	ated" or the abbreviation	
B. Enter new principal office address, if applical (Principal office address MUST BE A STREET A.			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE I	BOX)		
D. If amending the registered agent and/or registered new registered agent and/or the new registered Name of New Registered Agent		e name of the	
	(Florida street address)		
	(Pioriaa sireet adaress)		
New Registered Office Address:	(City)	, Florida(Zip Co	vle)
New Registered Agent's Signature, if changing R I hereby accept the appointment as registered agent		ations of the position.	
Sig	gnature of New Registered Agent, if chang	zing	
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 Do	<u>×e</u>	
X Remove	<u>v</u>	Mike Jo	ones	
X Add	<u>sv</u>	Sally Sr	nith	
Type of Action (Check One)	Title		<u>Name</u>	<u>Addres</u> s
1) Change		_		
Add				
Remove				
2) Change		_		
Add				
Remove 3) Change		_		
Add				
Remove				
4) Change		- -		
Add				
Remove				
5) Change				
Add		_		
Remove				
6) Change				
Add		-		
Remove				

	(Be specific)
	
f an amendment provides for an exch	hange, reclassification, or cancellation of issued shares,
f an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
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:

date this document was signed.	adoption:	, if other than t
nee in a side of the		
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 I	block does not meet the applicable statutory filing requirements, this Department of State's records.	date will not be listed as t
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were a action was not required.	dopted by the incorporators, or board of directors without shareholder a	ction and shareholder
☐ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendme sufficient for approval.	nt(s)
	oproved by the shareholders through voting groups. The following state or each voting group entitled to vote separately on the amendment(s):	ement
"The number of votes can	st for the amendment(s) was/were sufficient for approval	
by	.,,	
	(voting group)	
02/28/202	27	
Dated		
Dated	white all	
Signature	BU UM	
` · ·	director, president or other officer – if directors or officers have not been	
	ed, by an incorporator – if in the hands of a receiver, trustee, or other content in the fiduciary by that fiduciary)	ουπ
шррот	CARELIA MONTERO	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	