## P22000047942

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(6.9.6 a.t. 1.1.6 %)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
Special instructions to Filing Officer.

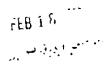




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2022 ROV 22 ANTO: 02



## COVER LETTER

**TO:** Amendment Section Division of Corporations

NAME OF CORPORA	ATION:	SIANIE BEAUTY COR.		
	OCUMENT NUMBER: P22000047942			
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:		
		MARTHA OTALORA		
_		Name of Contact Persor	1	
	MO A	ACCOUNTING SERVICES	S CORP	
-	Firm/ Company			
	175 FONTAINEBLEAU BLVD, SUITE 1-G2			
_		Address		
	MIAMI, FLORIDA 33172			
_		City/ State and Zip Code	2	
	i	nfo@moaccountingservices	a.com	
_		sed for future annual report		
For further information	concerning this matter, plea-	se call:		
RAISBER L TRUJILLO	0	at ( 305	216-6353	
Name of	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:	
S \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$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		Amend Divisio The Co 2415 Y	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303	

## Articles of Amendment to Articles of Incorporation of

SIANIE BEAUTY CORP	613 1717 1717	22	
(Name of Corporation as currently filed with the Florida Dept. of State		<u> </u>	
P22000047942	0.2	Ę	
(Document Number of Corporation (if known)	<u></u>	-[:2	

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

	The no
," "company," or "incor <sub>)</sub> '. A professional corpo 2A."	porated" or the abbreviation "Corp. pration name must contain the wo
N/A	
N/A	
address in Florida, ente	r the name of the
la street address)	
	, Florida
(City)	(Zip Code)
gent: liar with and accept the o	bligations of the position.
	N/A  N/A  N/A  N/A  A professional corporation of the struct address in Florida, enteress:  (City)

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)

Example:

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.

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	<u>Addres</u> s
1) X Change	S	CARLOS D MENDOZA	10400 NW 74TH ST APT 107
Add			MEDLEY, FLORIDA 33178
Remove			
2) Change	VP	JONES HAUR XUE MATOS	66-13 48th AVE
X Add			WOODSIDE, NY 11377
Remove Change			
Add			
Remove			<del></del>
4) Change			
Add			
Remove			- <del></del>
5) Change			
Add			<del></del>
Remove			
6) Change			
Add			
Remove			

(Attach additional s	ding additional Article sheets, if necessary). (	Be specific)			
√A					
				·	
			•		
				<u> </u>	
		<del></del>	<del></del>		
			<del></del>	<del>_</del>	<u> </u>
		<u>.                                    </u>			
. If an amendment	provides for an exchan	ge, reclassification,	or cancellation of iss	ued shares,	
if not applica	plementing the amend while, indicate N/A)	ment it not containe	u m me amenumem	nsen.	
1/A					

	11/18/2022	
	th amendment(s) adoption:	_, if other than the
date this docum		
Effective date j	11/01/2022	
Effective date j	(no more than 90 days after amendment file date)	
	ate inserted in this block does not meet the applicable statutory filing requirements, this date will betive date on the Department of State's records.	not be listed as the
Adoption of A	mendment(s) (CHECK ONE)	
The amendmaction was n	nent(s) was/were adopted by the incorporators, or board of directors without shareholder action and of required.	shareholder
	nent(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) holders was/were sufficient for approval.	
must be sep	nent(s) was/were approved by the shareholders through voting groups. The following statement arately provided for each voting group entitled to vote separately on the amendment(s):  umber of votes cast for the amendment(s) was/were sufficient for approval	2022 NUT 22 ATT 10: 02
by	(voting group)	
	(voting group)	9 22 MHO: 02
	11/01/2022	<u> </u>
	Dated	은 한
	Signature Raisbor Tronillo	02 1
	Signature Kashar Transition  (By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
	RAISBER L TRUJILLO	
	(Typed or printed name of person signing)	
	PRESIDENT.	
	(Title of person signing)	