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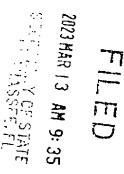
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COVER LETTER

TO: Amendment Section

Division of Corporations DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: For further information concerning this matter, please call: Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: □ \$35 Filing Fee **☑\$43.75** Filing Fee & ☐\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Street Address **Mailing Address** Amendment Section Amendment Section Division of Corporations Division of Corporations The Centre of Tallahassee P.O. Box 6327 2415 N. Monroe Street, Suite 810 Taliahassee, FL 32314

Tallahassee, FL 32303

Articles of Amendment

to

Articles	of	Incorporation	
		of	

embracing Be	eauty Inc		· · · · · · · · · · · · · · · · · · ·
(Name of Corporation as curren	ntly filed with the Flori	da Dept. of State)	
(Document Number	of Corporation (if know	m)	
Pursuant to the provisions of section 607.1006, Florida Statutes, thits Articles of Incorporation:	is Florida Profit Corpor	ation adopts the following	ng amendment(s)
A. If amending name, enter the new name of the corporation:			
N/A			The new
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". "chartered," "professional association," or the abbreviation "P.AB. Enter new principal office address, if applicable:	A professional corpor		
(Principal office address MUST BE A STREET ADDRESS)			<u>1</u> 023
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C. Enter new mailing address, if applicable:	/		ω i
(Mailing address MAY BE A POST OFFICE BOX)	N/A	S C	<u> </u>
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). If amending the registered agent and/or registered office ad	dress in Florida, enter	the name of the	
new registered agent and/or the new registered office addre	<u>ss:</u>		
Name of New Registered Agent V/A			
		,	_
(Florida s	treet address)		
New Registered Office Address:		, Florida	
	(City)	(Zip	Code)
ew Registered Agent's Signature, if changing Registered Ager	·•·		
hereby accept the appointment as registered agent. I am familiar		igations of the position.	
	-	- •	
NA			
Signature of New	Registered Agent, if char	nging	

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 Doe	
X Remove	Y	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	<u>P</u>	Daydeli Menendez	
Add			Apt # 508
X Remove	0		Miami, 76 33157
2) Change		Kosana L. Grav Goyez	
Add			Miami, FL 33175
X Remove 3) Change	- 15	<u> </u>	
Add			
Remove		•	
4) Change			
Add			
Remove			· · · · · · · · · · · · · · · · · · ·
5) Change		<u> </u>	
Add			
Remove			
6) Change			
Add			
Remove			

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	provides for an exc	change, reclassificatio	n, or cancellation of	issued shares,	
if an amendment p		endment if not conta	ined in the amendme	nt itself:	
f an amendment p	olementing the am				
If an amendment p provisions for imp (if not applicate	plementing the amble, indicate N/A)				
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The date of each amendate this document was	
Effective date if applic	able:
	(no more than 90 days after amendment file date)
	ed in this block does not meet the applicable statutory filing requirements, this date will not be listed as the te on the Department of State's records.
Adoption of Amendme	nt(s) (CHECK ONE)
The amendment(s) was not require	as/were adopted by the incorporators, or board of directors without shareholder action and shareholder ed.
	as/were adopted by the shareholders. The number of votes cast for the amendment(s)
by the shareholders	was/were sufficient for approval.
	· · ·
☐ The amendment(s) w	was/were sufficient for approval. as/were approved by the shareholders through voting groups. The following statement rovided for each voting group entitled to vote separately on the amendment(s):
☐ The amendment(s) w must be separately p	as/were approved by the shareholders through voting groups. The following statement
☐ The amendment(s) w must be separately p "The number o	as/were approved by the shareholders through voting groups. The following statement rovided for each voting group entitled to vote separately on the amendment(s):
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