P220000848//

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF COR	PORATION: HAPPY HAIR :	SPA CORP 				
DOCUMENT NU	LIBRAUUUCCO					
The enclosed Artic	cles of Amendment and fee are	submitted for filing.				
Please return all co	orrespondence concerning this	matter to the following:				
	MARTHA CENTENO					
		Name of Contact Person	1			
	HAPPY HAIR SPA CORP					
	·	Firm/ Company				
	2990 NW 3 ST					
		Address				
	MIAMI, FL 33146					
		City/ State and Zip Code	2			
	FPARRADURAN@HOT	MAIL.COM				
	E-mail address: (to be	used for future annual report	notification)			
For further inform	ation concerning this matter, pl	lease call;				
MARTHA CENT	ENO	3057424591 at (,			
Na	me of Contact Person		de & Daytime Telephone Number			
Enclosed is a chec	k for the following amount ma-	de payable to the Florida Depa	artment of State:			
\$35 Fiting Fee	e ☐\$43.75 Filing Fee & Certificate of Status		□\$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, Ft. 32314		Amend Divisio The Co	Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810			

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

HAPPY HAIR SPA CORP

(Name of Corporati	ion as currently filed with the Flo	rida Dept. of State)
P22000084811		
(Docum	nent Number of Corporation (if kno	own)
Pursuant to the provisions of section 607,1006, Floridates Articles of Incorporation:	a Statutes, this Florida Profit Corp.	oration adopts the following amendment(s) to
A. If amending name, enter the new name of the co	orporation:	
		The new
name must be distinguishable and contain the word "co "Inc" or Co.," or the designation "Corp," "Inc, "chartered," "professional association," or the abbre	" or "Co". A professional corp	
B. Enter new principal office address, if applicable	e:	
(Principal office address <u>MUST BE A STREET ADI</u>	DRESS)	
		
C. Enter new mailing address, if applicable:	416	
(Mailing address <u>MAY BE A POST OFFICE BO</u>	<u></u>)	
D. If amending the registered agent and/or registered new registered agent and/or the new registered		er the name of the
Name of New Registered Agent		
	(Florida street address)	
New Registered Office Address:		, Florida
the state of the s	(City)	(Zip Code)
No. Designated Asset Statement of the sector Designation	e a la l	
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent.	<u>ustered Agent:</u> I am familiar with and accept the c	obligations of the position.
Sim	ature of New Registered Agent, if c	honaina
Sign	аних 19 1165 <i>подыства пуст, ц</i> С	minging

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 Doc, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT</u>	John Doc	
X Remove	\underline{V}	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change	i.	CENTENO, MARHA	2990 NW 3RD ST
Add			MIAMI. FL 33125
X Remove			
2) Change	P	CENTENO, MARTHA	2990 NW 3RD ST
X Add			MIAMI, FL 33125
Remove 3.) Change	<u></u>		
Add			
Remove			
4) Change			<u> </u>
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

anach <i>da</i>	ditional she	ng additions sets, if necess	sary). (B	e specific)						
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(if no	nt applicabl	e, indicate N	V/A)	17 170	Contained	in the unit	- HOME H	<u></u>		
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11/07/2022	
The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
11/07/2022	
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date wi document's effective date on the Department of State's records.	ll not be listed as the
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
☐ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action are action was not required.	d shareholder
■ The amendment(s) was/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) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	2022 1:0:22 AN IF 64
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by''	22
(voting group)	i. E
	ست در. نیس است
11/07/2022	11 66 ac
Dated \	<u> </u>
Signature Maron Curber	
(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)	
MARTHA CENTENO	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	