P23000048246

	,
(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	_
PICK-UP WAIT MAIL	
(Business Entity Name)	_
(Document Number)	_
Certified Copies Certificates of Status	-
	_
Special Instructions to Filing Officer:	
	┙





600414727256

08/12/23--01039--006 **35.00

ر. ان است

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORP	ORATION: NAIL BY FLAWI	LESS CO.	
DOCUMENT NU	MBER: P23000048246	9.000	
	les of Amendment and fee are su	bmitted for filing.	
Please return all co	respondence concerning this ma	itter to the following:	
	SHERVON HART		
		Name of Contact Person	1
	NAILS BY FLAWLESS CO		
		Firm/ Company	
	1280 S. POWERLINE RD S	• •	
		Address	
	POMPANO BEACH, FL 330	069	
		City/ State and Zip Code	2
	nailsbyflawless1@gmail.com	1	
	= =	sed for future annual report	notification)
For further informa	tion concerning this matter, plea)
Nan	ne of Contact Person	Area Co)
Enclosed is a check	for the following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fee	☐S43.75 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)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio The Co	Address ment Section n of Corporations entre of Tallahassee J. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment Articles of Incorporation

	O1		
NAIL BY FLAWLESS CO.			
(Name e	of Corporation as currently	filed with the Florida Der	ot. of State) 57
P23000048246	·· · -		
	(Document Number of	Corporation (if known)	·
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, this <i>F</i>	lorida Profit Corporation a	dopts the following amendment(s)
A. If amending name, enter the new name, NAILS BY FLAWLESS CO.	ame of the corporation:		The new
name must be distinguishable and contain "Inc.," or Co.," or the designation "Cohartered," "professional association,"	Torp, " "Inc," or "Co". A	mpany," or "incorporated" professional corporation (or the abbreviation "Corp.,"
B. Enter new principal office address, (Principal office address <u>MUST BE A S</u>			
C. Enter new mailing address, if appli (Mailing address <u>MAY BE A POST</u>)			
D. If amending the registered agent an new registered agent and/or the nev		ess in Florida, enter the na	me of the
new registered agent and/or the nev	SHERVON HART		
Name of New Registered Agent	SHERVONTARG		
	1280 S. POWERLINE RD S	SUITE 28	
	tFlorida stree	et address)	
New Registered Office Address:	POMPANO BEACH, FL		. Florida 33069
		(lip)	(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Shervon Hart (Aug 30, 2023 18 17 EDT)

Signature of New Registered Agent, if changing

Check if applicable

 \square 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> <u>J</u>	ohn Doe	
X Remove	<u>v</u> <u>x</u>	Mike Jones	
_X Add	<u>sv</u> s	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	P	SHEILA ANDREWS-GAINES	1280 S. POWERLINE RD
X Add			SUITE 28
Remove			POMPANO BEACH, FL 33069
2) X Change	М	SHERVON HART	1280 S. POWERLINE RD
Add			SUITE 28
Remove 3) Change	RA	SHEILA ANDREWS-GAINES	POMPANO BEACH, FL 33069 1280 S. POWERLINE RD
Add			SUITE 28
X Remove			POMPANO BEACH, FL 33069
4) Change	RA	SHERVON HART	1280 S. POWERLINE RD
X Add			SUITE 28
Remove			POMPANO BEACH, FL 33069
5) Change	O	SHERVON HART	1280 S. POWERLINE RD
Add			SUITE 28
X Remove			POMPANO BEACH, FL 33069
6) Change			
Add			
Remove			

E. <u>If amending or adding additional Articles, enter change(s) here:</u> (Attach additional sheets, if necessary). (Be specific) DEFICER WAS NEVER SUPPOSE TO BE SHERVON HART, SHE WAS	ONLY SUPPOSE TO BE JUST A MEMBER
ND REGISTERED AGENT, SHEILA ANDREWS-GAINES WAS SUPPO	SE TO BE THE PRESIDENT NOT
REGISTERED AGENT	
	
If an amendment provides for an exchange, reclassification, or cancellar provisions for implementing the amendment if not contained in the analysis (if not applicable, indicate N/A)	ation of issued shares, mendment itself:

. . .

	08/30/2023
The date of each amendment(s)	adoption:, if other than th
date this document was signed.	
	/30/2023
Effective date if applicable:	(no more than 90 days after amendment file date)
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Note: If the date inserted in this document's effective date on the F	block does not meet the applicable statutory filing requirements, this date will not be listed as the Department of State's records.
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were action was not required.	dopted by the incorporators, or board of directors without shareholder action and shareholder
☐ The amendment(s) was/were ac by the shareholders was/were s	lopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.
	oproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):
"The number of votes cas	st for the amendment(s) was/were sufficient for approval
by	
	(voting group)
08/30/202 Dated	3
194ted	
Signature	10
Signature (By a)	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 court
	nted fiduciary by that fiduciary)
	SHERVON HART
	(Typed or printed name of person signing)
	OFFICER
	(Title of person signing)