P23000062328

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORP	ORATION: MIO E TUO HAII	REXTENSIONS & COLO	UR STUDIO. INC.
	MBER: P23000062328		
	es of Amendment and fee are su	ibmitted for filing.	
Please return all cor	respondence concerning this ma	atter to the following:	
	Lorena Figueredo Perez		
		Name of Contact Person	1
		Firm/ Company	
	1111 Adams Street		
	· · · · · · · · · · · · · · · · · · ·	Address	
	Hollywood, FL 33019		
		City/ State and Zip Code	e
	lorenafigueredoperez29@gm	ail.com	
	E-mail address: (to be us	sed for future annual report	notification)
For further informat	ion concerning this matter, plea	se call:	
Lorena Figueredo Perez		at (437	ge & Daytime Telephone Number
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:
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 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 Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment Articles of Incorporation of

/hl 0.53 .1	
(Name of Corporation a	s currently filed with the Florida Dept. of State)
P23000062328	2029
(Document	Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Staits Articles of Incorporation:	tutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corpo	ration:
	The new
	ration," "company," or "incorporated" or the abbreviation "Corp.," "Co". A professional corporation name must contain the word
B. Enter new principal office address, if applicable:	1111 Adams Street
(Principal office address MUST BE A STREET ADDRE.	SS) Hollywood, FL 33019
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1111 Adams Street
<u> </u>	Hollywood, FL 33019
D. If amending the registered agent and/or registered of	
new registered agent and/or the new registered offic	
Name of New Registered Agent Lorena Figuered	o Perez
1111 Adams Str	ret
	Florida street address)
New Registered Office Address: Hollywood	, Florida 33019
	(City) (Zip Code)
New Registered Agent's Signature, if changing Register I hereby accept the appointment as registered agent. Yam	
	X
Signature	of New Registered Agent, if changing

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>74</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>	<u>Name</u>	Address	
1) X Change	P	Lorena Figueredo Perez	1111 Adams Street	
Add			Hollywood, FL 33019	
Remove				
2) Change				
Add				
Remove 3) Change				
Add				
Remove				
4) Change		_		
Add				
Remove				
51 Change		_		
Add				
Remove				
6) Change				
Add				
Remove				

Attach additional sheets, if necessary).	(Be specific)
· · · · · · · · · · · · · · · · · · ·	
	-
	
f an amendment provides for an evch	hange, reclassification, or cancellation of issued shares,
(if not applicable, indicate N/A)	endment if not contained in the amendment itself:
(y nor apprearie, materie 1921)	

The date of each amendment(s) adopti date this document was signed.	on:	, if other than the
C		
Effective date <u>if applicable</u> :	(no more than 90 days after am	vendment file date)
Note: If the date inserted in this block document's effective date on the Departi	does not meet the applicable statutory	filing requirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopted action was not required.	by the incorporators, or board of director	ors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders was/were sufficient		tes cast for the amendment(s)
☐ The amendment(s) was/were approve must be separately provided for each	d by the shareholders through voting gro voting group entitled to vote separately	
"The number of votes cast for the	ne amendment(s) was/were sufficient for	r approval
by	(voting group)	
	(voting group)	
05-01-2024 Dated		
Signature(By a directe	or, president or other officer – if directors	s or officers have not been
	an incorporator – if in the hands of a rec duciary by that fiduciary)	reiver, trustee, or other court
P230	000062328	
	(Typed or printed name of person	signing)
Pres	ident	

(Title of person signing)