## P2500073956

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: REAL ESTHETICS CORP
DOCUMENT NUMBER: <u>P23</u> <b>00</b> 0 0 7 3 9 5 6
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Gabriel Eduardo Fagundes Assis da Silva Name of Contact Person Real Esthetics Corp Firm/Company
16005 DIXIE HIGHWAY, SUITE 402
BOCA RATON   FLORIDA   33432.  City/ State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Gabriel Eduardo Facindes Assis da Silva at (857) 247 3688  Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## **Articles of Amendment** of

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Articles	of	Incorporatio
		- c

Real Esthetics Corp		
(Name of Corporation as current)	y filed with the Florida Dept. of State)	
P2300013956		
(Document Number o	f Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to	
A. If amending name, enter the new name of the corporation:	TO TO	
name must be distinguishable and contain the word "corporation," "on line," or Co.," or the designation "Corp," "Inc," or "Co". I chartered," "professional association," or the abbreviation "P,A."	1 professional corporation name must contain the word	
B. Enter new principal office address, if applicable:	1600 5 DIXIE HIGHWAY	
(Principal office address MUST BE A STREET ADDRESS)	Suite 102	
	BOCA RATON, FL 33432	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1600 5 DIXIE HIGHWAY 3	
	SUITE 402	
	BOCA RATON, FL 33432;	
D. If amending the registered agent and/or registered office address registered agent and/or the new registered office address		
Name of New Registered Agent	'.≻' 	
	- <u>.</u> —	
(Florida str	eet addressj	
New Registered Office Address:	. Florida	
	(City) (Zip Code)	
New Registered Agent's Signature, if changing Registered Agent, I hereby accept the appointment as registered agent. I am familiar v		
Signature of New R.	egistered 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)

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>John D</u>	<del>oc</del>	
X Remove	<u>V</u> <u>Mike J</u>	<u>ones</u>	
X Add	SV Sally S	<u>smith</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add Remove	D.P.T. 5, VP	GABRIEL Eduardo fagundes Assis da Silva	1600 S DIXIE  HIGHWAY, BOCA RATON, FL, 33432, SUITE 402
2) Change Add	D.P.T. 5, VP	GABRIEL SILVA	1600 & DIXIE HIGHWAY, BOCA RATOR
X Remove			9, 33432, Site 402
Add Remove 4) Change Add			
Remove 5) Change Add		<u> </u>	
Change Add Remove			

Attach additional sheets, if necessary). (Be specific)	
	<del>-</del>
	<del></del>
-	
-	
an amendment provides for an exchange, reclassi	fication, or cancellation of issued shares,
provisions for implementing the amendment if not (if not applicable, indicate N/A)	contained in the amendment itself:
(у погарунсате, также млл)	- <sub></sub>
	· · · · · · · · · · · · · · · · · · ·
·	
	<del></del>

The date of ea	ach amendment(s) adoption: November, 07, 2013 ment was signed.	, if other than
	e if applicable:	
	(no more than 90 days after amendment file date)	
	date inserted in this block does not meet the applicable statutory filing requirements, this date varieties on the Department of State's records.	will not be listed as
Adoption of A	Amendment(s) (CHECK ONE)	
The amendr action was r	ment(s) was/were adopted by the incorporators, or board of directors without shareholder action a not required.	and shareholder
	ment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) reholders was/were sufficient for approval.	
	ment(s) was/were approved by the shareholders through voting groups. The following statement parately provided for each voting group entitled to vote separately on the amendment(s):	
"The	number of votes cast for the amendment(s) was/were sufficient for approval	
by	<u>1</u>	
	(voting group)	
	Dated 11/107/2023	7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7
	Signature(By a director president or other officer – if directors or officers have not been	<u> </u>
	selected by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	1
	Gabriel Eduardo Fabricles Assis das	silva =
	(Typed or printed name of person signing)	-: 70
	Owner Director	
	(Title of person signing)	

the

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