P24000012668

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Name Change

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COVER LETTER

TO: Amendment Section Division of Corporations					
NAME OF CORPORATION: SujA Beaty Salon Inc					
DOCUMENT NUMBER: 724000012668					
The enclosed Articles of Amendment and fee are submitted for filling.					
Please return all correspondence concerning this matter to the following:					
Kevin Batista					
Name of Contact Person					
Firm' Company					
Riverview FL 33579					
Address					
Kiderview LL 33579					
City/ State and Zip Code					
E-mail address: (to be used for future annual report notification)					
E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
Kouin Batista 812 389-3596					
Kevin Batista at (813), 389-3596 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 Certificate of Status Certified Copy (Additional Copy is enclosed) \$35 Filing Fee Certificate of Status S43.75 Filing Fee Certified Copy (Additional Copy is enclosed) S43.75 Filing Fee Certified Copy (Additional Copy is enclosed)					
Mailing Address Street Address					
Amendment Section Amendment Section Division of Corporations Division of Corporations					
P.O. Box 6327 The Centre of Tallahassee					
Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303					

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Articles of Amendment to Articles of Incorporation of

(Name of Corpo	oration as currently	v filed with the Florid	la Dept. of State)		
P24000012668					
(D	ocument Number of	f Corporation (if know	n)		
Pursuant to the provisions of section 607,1006. Flits Articles of Incorporation:	orida Statutes, this a	Florida Profit Corpor	ation adopts the follow	ving amendment	(s) to
A. If amending name, enter the new name of t	he corporation:				
SUJA Beauty	Salon	Inc		The new	
name must be distinguishable and contain the wor. "Inc.," or Co.," or the designation "Corp," " "chartered," "professional association," or the a	Inc," or "Co". A	l professional corpor	prated" or the abbrevi ation name must con	ation "Corp.," stain the word	
B. Enter new principal office address, if applic (Principal office address MUST BE A STREET					
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	E BOX)				
D. If amending the registered agent and/or registered agent and/or the new register			the name of the		2024
Name of New Registered Agent					024 NAR
	/Clauda su	and address t		<u> </u>	1
	ir iorida sir	eet address))-<	8 1
New Registered Office Address:		(City)	, Florida	ip Code)	AM 11: 39
					ဒ္ဌ
New Registered Agent's Signature, if changing I hereby accept the appointment as registered age			ligations of the positio	n.	
	Signature of New R	egistered Agent, if cha	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.

X Change	<u>PT</u>	John Do	<u>c</u>	
X Remove	$\underline{\mathbf{v}}$	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	<u>uith</u>	
Type of Action (Check One)	Title		Name	<u>Addres</u> s
1) Change		_		<u> </u>
Add				
Remove				
2) Change		_		
Add				
Remove 3) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				-
5) Change		_		
Add				
Remove				
6) Change		_		
Add				
Remove				

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)	
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	-	
		
		-
		·
f an amendment provides for an excl	nange, reclassification, or cancellation of issued shares,	
provisions for implementing the ame	ndment if not contained in the amendment itself:	
(if not applicable, indicate N/A)		
		··· ·
	_	

The date of each amendment(s) adoption:		, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does document's effective date on the Department of	not meet the applicable statutory filing requirements, this date will not State's records.	ot be listed as the
Adoption of Amendment(s) (C	HECK ONE)	
The amendment(s) was/were adopted by the action was not required.	e incorporators, or board of directors without shareholder action and sh	nareholder
☐ The amendment(s) was/were adopted by the by the shareholders was/were sufficient for	e shareholders. The number of votes cast for the amendment(s) approval.	
	the shareholders through voting groups. The following statement g group entitled to vote separately on the amendment(s):	
"The number of votes cast for the ame	endment(s) was/were sufficient for approval	
by	."	
(vo	oting group)	
Dated 2/22/d Signature <u>Kenin</u> E) 94 7	
Signature Segue D	allsla	-
	sident or other officer – if directors or officers have not been corporator – if in the hands of a receiver, trustee, or other court	
	by by that fiduciary)	
	(Typed or printed name of person signing)	
P.	roident	
	(Title of person signing)	