Florida Department of State

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COR AMND/RESTATE/CORRECT OR O/D RESIGN JOY BEUTY SALON, P.A.

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Corporate Filing Menu

Help

TO: Amendment Section

COVER LETTER

Division of Cor	porations					
NAME OF CORPO	PRATION: JOY BEUTY SAL	ON, P.A.		_		
	1BER: P24000018858	····		_		
The enclosed Article	s of Amendment and fee are su	bmitted for filing.				
Please return all corr	espondence concerning this ma	itter to the following:				
	Mike Town			47		
		Name of Contact Person	1			
	LegalZoom.com, Inc.			i .		
	Firm/ Company					
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		Address		•		
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For further information	on concerning this matter, plea	se call:				
Mike Town		at (_800	773-0888 ext. 9724			
Name	of Contact Person	Area Co) 773-0888 ext. 9724 de & Daytime Telephone Nu	ımber		
Enclosed is a check f	or the following amount made	payable to the Florida Depa	artment of State:			
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Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, Fl. 32314

Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

To: Mike Town

Articles of Amendment to Articles of Incorporation of

JOY BEUTY SALON, P.A.				
(<u>Name</u> P24000018858	of Corporation as curr	ently filed with the Florida De	ept. of State)	
	(Document Number	e: of Corporation (if known)		
Pursuant to the provisions of section 607 its Articles of Incorporation	.1006, Florida Statutes, t	his Florida Profit Corporation	adopts the following am	endment(s) to
A. If amending name, enter the new n	anie of the corporation	<u>i</u>		
Joy Beauty Salon Inc			1he	new
name must be distinguishable and contain "Inc" or Co.," or the designation "Contrartered," "professional association."	Corp." "hiz." or "Co".	. A professional corporation	i" or the abbreviation "C	orn. "
B. Enter new principal office address.	if applicable:		• •	
(Principal office address MUST BIS A STREET ADDRESS)				— - *
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		· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	
C. Enter new mailing address, if appl	icable:			တဲ့ နို
(Mailing address MAY BE A POST	OFFICE BOX)		<u> </u>	— <u>∑</u>
D. If amending the registered agent an new registered agent and/or the new	w registered office adds		ame of the	
Name of New Registered Agent	Edna Varon			
	14297 SW 94TH CIR	···-	· · · · · · · · · · · · · · · · · · ·	
	•	i struct address)	33186	
New Registered Office Address:	MIAMI	n. 90.	, Florida	
		(City)	(Zip Code)	
New Registered Agent's Signature, if c I hereby accept the appointment as regist	hanging Registered Age west agent. I am familia	ent: ar with and accept the obligation	ons of the position.	
	Eld	Edna Varon		
*************************************	Signature of Nev	s Registered Agent, if changing		
Check if applicable The amendment(s) is/are being filed p	ursuant to s. 607.0120 (1	1) (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>Pr</u> <u> </u>	<u>khn Doe</u>			
X Remove	<u>∨</u> .	Mike Jones			
X Add	<u>sv</u> <u>s</u>	Sally Smith		•	202
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address		7024 HAY
1) X Change	PTSD	Edna Varon	14297 SW 94TH CIR	CLÉLN.	
Add			MIAMI, FL 33186		A
Remove				, 1:	8: 50
2) Change					<u> </u>
Add					
Remove 3.) Change					
Add					
Remove					
4) Change					
Add					
Remove					
5) Change					
Add					
Remove					
6) Change					
Add					
Remove					

F. If amending or adding additional Art (Attach additional sheets, if necessary).	(Be specific)	tiaj tiere.			
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. If an amendment provides for an exc	hanga radarsilios	ion ou concellation	of increase chances		
 provisions for implementing the ame 	endment if not con	tained in the amen	dment itself:		
(if not applicable, indicate N/A)			<u> </u>		
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LegalZoom.com, Inc. 13056750602

From: Sylv From Byrd Mertinez (

03/19/2024 The date of each smeadment(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 not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. Adoption of Amendment(s) (CHECK ONE) The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required. [] 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. [I] 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): "The number of voies east for the amendment(s) was/were sufficient for approval (voting group) Signature (By a director, president or other officer - if directors or officers have not been selected, by an inforporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary) Edna Varon

(Typed or printed name of person signing)

(Title of person signing)

President