# P93000073263

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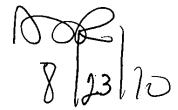


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SECRETARY OF STATUS. 12



#### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	RATION:	BEAUTY EXPLOSION,	INC.
DOCUMENT NUM	BER:	P93000073263	;
The enclosed Articles	s of Amendment and fee as	re submitted for filing.	
Please return all corre	espondence concerning thi	s matter to the following:	
_		TAVIA MCDOUGLE	
	N	ame of Contact Person	
_	BEAU	TY EXPLOSION, INC.	
11555 HERON BAY BLVD SUITE 200 Address			
	CORA	L SPRINGS, FL 33076	
		ity/ State and Zip Code	
·	INFO@BEA	UTYANATOMY.COM d for future annual report notification)	
	E-mail address: (to be used	d for future annual report notification)	
For further information	on concerning this matter,	please call:	
OCTAV	/IA MCDOUGLE	at (954)4	461-9009
Name of	Contact Person	Area Code & Daytime Te	elephone Number
Enclosed is a check for	or the following amount m	nade payable to the Florida Depa	rtment of State:
☑ \$35 Filing Fee	□\$43.75 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		Street Address Amendment Section	
Division of Corporations		Division of Corporations	
P.O. Box 6327 Tallahassee, FL 32314		Clifton Building 2661 Executive Center Circ	ele <sup>.</sup>

Tallahassee, FL 32301

### Articles of Amendment to Articles of Incorporation

FILED

Articles of l	Incorporation I I be to Let
•	of 2010 AUG 20 PM 12: 12
BEAUTY EXPLOSI	ON, INC.
	ith the Florida Dent of STARETARY OF STATE
P930000732	TALL AHASSEE, FLORID
(Document Number of Corpo	
ursuant to the provisions of section 607.1006, Florida St nendment(s) to its Articles of Incorporation:	tatutes, this Florida Profit Corporation adopts the follow
If amending name, enter the new name of the corporation	ation:
	The new
ame must be distinguishable and contain the word "abbreviation "Corp.," "Inc.," or Co.," or the designation ame must contain the word "chartered," "professional ass	"Corp," "Inc," or "Co". A professional corporation
Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRES.	1313 S, POWERLINE RD
	POMPANO BEACH, FL 33069
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	11555 HERON BAY BLVD SUITE 200
	CORAL SPRINGS, FL 33076
. If amending the registered agent and/or registered of new registered agent and/or the new registered office	ffice address in Florida, enter the name of the address:
Name of New Registered Agent:	
New Registered Office Address: (P	Florida street address)
	, Florida
	City) (Zip Code)

Signature of New Registered Agent, if changing

## 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)

Title'	Name	Address	Type of Action
<u>D</u>	FELISCIA WILLIAMS	11555 HERON BAY BLVD SUITE 200 CORAL SPRINGS, FL 33076	_ □ Add _ ☑ Remove
<u>D</u>	SAMANTHA KEW,	11555 HERON BAY BLVD SUITE 200 CORAL SPRINGS, FL 33076	_ □ Add _ ☑ Remove
<u>D</u>	TACEINTE MCDOUGLE	11555 HERON BAY BLVD SUITE 200 CORAL SPRINGS, FL 33076	_ ☐ Add _ ☑ Remove
E. <u>If ame</u>	nding or adding additional Articles, en	ter change(s) here:	
	additional sheets, if necessary). (Be sp		
		· · · · · · · · · · · · · · · · · · ·	
	amendment provides for an exchange,		
	sions for implementing the amendment not applicable, indicate N/A)	n not contained in the amendment	itseii:
		·	

# 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)

Title '	<u>Name</u>	Address	Type of Action
<u>.</u> D	STOCKAR MCDOUGLE	11555 HERON BAY BLVD SUITE 200 CORAL SPRINGS, FL 33076	_ □ Add □ Remove
<u>D</u>	CLAUDETTE WHEATLEY	11555 HERON BAY BLVD	. □ Add ☑ Remove
<u>VP</u>	LATAVIA CAREY	11555 HERON BAY BLVD SUITE 200 CORAL SPRINGS, FL 33076	_ ☑ Add _ ☑ Remove
	ding or adding additional Articles, ente dditional sheets, if necessary). (Be spec		
	•		
provisi	mendment provides for an exchange, re ons for implementing the amendment it oot applicable, indicate N/A)		
	<del></del>		
		1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-	

The date of each amendmen	t(s) adoption: <u>08</u>	/08/2010
Effective date if applicable:	08/08/2010	(date of adoption is required)
Elective date if applicable.		0 days after amendment file date)
Adoption of Amendment(s)	( <u>CH</u>	ECK ONE)
The amendment(s) was/we by the shareholders was/w		shareholders. The number of votes cast for the amendment(s) approval.
		e shareholders through voting groups. The following statemen group entitled to vote separately on the amendment(s):
"The number of votes	cast for the amen	dment(s) was/were sufficient for approval
by		,"
•	(voting group)	
The amendment(s) was/we action was not required.	ere adopted by the	board of directors without shareholder action and shareholder
The amendment(s) was/we action was not required.	ere adopted by the	incorporators without shareholder action and shareholder
Dated_08/0		202
sel	y a director, presid	ent or other officer – if directors or officers have not been porator — If in the hands of a receiver, trustee, or other court by that fiduciary)
		OCTAVIA MCDOUGLE
	(Ту	ped or printed name of person signing)
		PRESIDENT
	(Title o	f person signing)