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UIL 8 2015 CLEWIS

## COVER LETTER

TO: Amendment Section

Division of Corporations Phoenix II Corp, d/b/a My Hair Place NAME OF CORPORATION: **DOCUMENT NUMBER:** The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Rolando Andres Name of Contact Person Phoenix II Corp Firm/ Company 3802 SW 136 Ave. Address Miami, FL 33175 City/ State and Zip Code maquinilla@comcast.net E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at ( 305 ) 505-1783 Area Code & Daytime Telephone Number Rolando Andres Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: \$43.75 Filing Fee & **\$35** Filing Fee □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) **Mailing Address** Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

FILED SECRETARY OF STAGE DIVISION OF CORPORATIONS

Phoenix II Corp.

15 JUN 30 AM 9: 48

т пости и согр.	
(Name of Corporatio	on as currently filed with the Florida Dept. of State)
Phoenix II Corp, 1	50000027/ <sub>0</sub> ( <sub>0</sub>
(Docume	ent Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	Statutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the con	rporation:
N/A	The new
	l "corporation," "company," or "incorporated" or the abbreviation "Inc," or "Co". A professional corporation name must contain the abbreviation "P.A."
D. Entenness and declared to the latest the second	N/A
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADD.	
C. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX	N/A
	<u> </u>
D. If amending the registered agent and/or registered	
new registered agent and/or the new registered o	office address:
Name of New Registered Agent Rolay	ado Andres
3802	25W 13Le Ave
11.	(Florida street address)
New Registered Office Address. /VLICY	1 , Florida J
	(City) (Zip Code)
New Registered Agent's Signature, if changing Regis	
I hereby accept the appointment as registered agent. I	am familiar with and accept the obligations of the position.
/ // Marso	When of Pau Paristand Agent is shouring
, signa	pure 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)

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>PT</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>	Name	<u>Addres</u> s
1) Change	v	Nayra Andres	3802 SW 136 Ave
Add X Remove			Miami, FL 33175
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			-T-10-
Remove			
5) Change			
Add			****
Remove			
6) Change			
Add			
Remove			•

(Attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
I/ <b>A</b>	
If an amendment provides for an exch	hange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	A. Jane Varia annihina danahalda Dalanda Andrea mish 60 shares and
ancellation of all 50 shares issued to Nayi	yra Andres. Lone remaining shareholder, Rolando Andres, with 50 shares and
00% ownership.	
ours ontistisp.	
or o omioinp.	
or a controller.	
or a controller.	
ovi emanginpi	
. Corro Criticionp.	

	6/15/2013	)		
The date of each amendment			— Filizã	if other than th
date this document was signed	. '	9#	ERETARY	OF STATE
	6/15/2015	รีเขาต	FON OF GO	OF STALE PROBRATIONS
Effective date <u>if applicable</u> :	<del></del> ,			
	(no n	nore than 90 days after amendment file <b>45</b> te	UUN 30	AH 3.40
Note: If the date inserted in document's effective date on the		t the applicable statutory filing requirement records.	ts, this dat	e will not be listed as the
Adoption of Amendment(s)	(CHECK (	<u>ONE</u> )		
☐ The amendment(s) was/wei by the shareholders was/wei		olders. The number of votes cast for the amount.	endment(s)	)
		nolders through voting groups. The followin entitled to vote separately on the amendmen		nt
"The number of votes	cast for the amendment	(s) was/were sufficient for approval		
by N/A		,"		
	(voting gra	nup)		
action was not required.		of directors without shareholder action and s		r
6/15/3	2015			
Dated				
se	plected, by an incorporate prointed fiduciary by tha Rolando Andres	other officer – if directors or officers have or – if in the hands of a receiver, trustee or of fiduciary)  or printed name of person signing)		<u>,                                    </u>
	President	Misident		
		(Title of person signing)		
		V		