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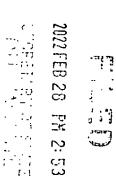
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	DRATION: BEAUTY ZONE, I	NC			
	1BER: P95000034844			_	
	es of Amendment and fee are sul	bmitted for filing.			
Please return all corr	espondence concerning this mat	tter to the following:			
	CHELSIK CHOI				
		Name of Contact Person			
	BEAUTY ZONE INC				
		Firm/ Company			
	1542 S FRENCH AVE				
		Address			
	SANFORD, FL 32771-3307				
		City/ State and Zip Code			
	BFPCOAST@AOL.COM				2022 FEB 28
	E-mail address: (to be us	ed for future annual report	notification)	- : 그림	833
For further informat	ion concerning this matter, pleas	se call:			28 PH
CHELSIK CHOI		at (407	687-2713		.; ;
Nam	e of Contact Person	Area Coo	de & Daytime Telephone N	Number	- 53
Enclosed is a check	for the following amount made	payable to the Florida Depa	artment 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)		
	ailing Address		Address Iment Section		

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

RECEIVED

FLORIDA DEPARTMENT OF STATE 2022 FEB 28 PM 1: 36 Division of Corporations

SECRETARY OF STATE TALLAHASSEE, FL

February 14, 2022

BEAUTY ZONE, INC. 1542 S FRENCH AVE SANFORD, FL 32771 US

SUBJECT: BEAUTY ZONE, INC. Ref. Number: P95000034844

We have received your document for BEAUTY ZONE, INC. and your check(s) totaling \$785.00. However, the document has not been filed and is being retained in this office for the following:

The total filing fee to reinstate your corporation and file the name change will be \$1,085.00 so we will need an additional \$300.00.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Diane Cushing Senior Section Administrator

Letter Number: 022A00003622

Articles of Amendment to Articles of Incorporation of

BEAUTY ZONE, INC (Name of Corporation as currently filed with the Florida Dept. of State) P95000034844 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: BEAUTY ZONE OF SANFORD, INC The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) Ň D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: വ Name of New Registered Agent (Florida street address) Florida New Registered Office Address: (City) (Zip Code) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position. Signature of New Registered 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)

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)	Title	<u>Na</u>	<u>ame</u>	Address
1) Change				
Add				
Remove				
2) Change				
Add				
Remove 3) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

-	litional sheets, if necessary). (Be specific)
If an ame	adment provides for an exchange, reclassification, or cancellation of issued shares,
nrovisios	is for implementing the amendment if not contained in the amendment itself:
(if no	t applicable, indicate N/A)
(ij no	i applicable, marciae (NA)

•

The date of each amendate this document was	ment(s) adoption: 1/18/2022	, if other than
Effective date if applic	1/ / 2	•
<u>,</u>	(no more than	90 days after amendment file date)
	d in this block does not meet the apple on the Department of State's records.	icable statutory filing requirements, this date will not be listed as
Adoption of Amendme	nt(s) (<u>CHECK ONE</u>)	
☐ The amendment(s) v	The state of the s	board of directors without shareholder action and shareholder
	s/were adopted by the shareholders. The vas/were sufficient for approval.	he number of votes cast for the amendment(s)
must be separately p	rovided for each voting group entitled to	
"The number of	votes cast for the amendment(s) was/w	ere sufficient for approval
by	(voting group)	·
Date	1/12/2522	
		
Signa	(By a director, president or other of	ficer – if directors or officers have not been the hands of a receiver, trustee, or other court y)
	CHEL SIK CHOI	
	(Typed or printed	d name of person signing)
	PRESIDENT	
	(Title of person)	