P950000 69610

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COVER LETTER

Division of Corporations Terrence Michael Salon, Inc. NAME OF CORPORATION: P95000069610 DOCUMENT NUMBER: _ The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Harvey Rollings Name of Contact Person Jones, Haber & Rollings Firm/ Company 1633 SE 47th Terrace Address Cape Coral, Florida 33904 City/ State and Zip Code ROLLINGS@JONESHABERLAW.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Harvey Rollings ___) <u>542-0700</u> 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 □\$43.75 Filing Fee & X \$43.75 Filling Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy

Mailing Address

TO: Amendment Section

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address

Amendment Section
Division of Corporations
Cliffon Building
2661 Executive Center Circle
Tallahassee, FL 32301

is enclosed)

Articles of Amendment Articles of Incorporation

Terrence Michael Salon, Inc.

(Name of Corporation as currently filed with the Florida Dept. of State)

ent(s) to

P95000069610		
(Document Number of	of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corporation adopts the	following amenda
A. If amending name, enter the new name of the corporation:		
N/A		The ne
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation nan	or the abbreviation
B. Enter new principal office address, if applicable:	N/A	
(Principal office address MUST BE A STREET ADDRESS)		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	
D. If amending the registered agent and/or registered office adenew registered agent and/or the new registered office address		
Name of New Registered Agent N/A		
(Florida s	treet address)	ŀ
New Registered Office Address:	, Florida,	CI: C 43
	(Ciù)	(Zip Code)
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familiar		osition.
Signature of New	Registered Agent, if changing	

address of each Officer Attach additional sheets. Please note the officer/displayer President; V= Vice Executive Officer; CFO held. President, Treasure Changes should be noted a change, Mike Jones leadlike Jones, V as Remove	and/or D if necess rector title President = Chief I r. Directo I in the foliones the co	ary) e by the first letter of the office title: c; T= Treasurer, S= Secretary; D= Director, TR- Financial Officer. If an officer/director holds more or would be PTD. Howing manner. Currently John Doe is listed as the orporation, Sally Smith is named the V and S. These	Trustee; C = Chairman or Clerk; CEO = Chief than one title, list the first letter of each office PST and Mike Jones is listed as the V. There is
Example: - <u>X-</u> Change	PT	John Doe	
X Remove	<u>Y</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</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

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)	
Amending Article III to Read as follows:	
Article III	
The aggregate number of shares which the corporation shall have	_
authority to issue shall be 1000 shares of \$1.00par value common	
stock, which shall be nonassessable and held, sold, and paid for	· · · ·
at such time and in such manner as the Board of Directors may from time to time determine. The shares of the Corporation shall not be	
divided in classes and the Corporation is not authorized to issue	
shares in series.	
	_
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,	
provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A) N/A	
	_
	_

The date of each amendment(s) adoption:Date_this_document_was_signed if othe date this document was signed.	er than the
Effective date if applicable: Effective upon Amendment Filing	_
(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 lis document's effective date on the Department of State's records.	ated as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes east for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ 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 votes east for the amendment(s) was/were sufficient for approval	
by	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Signature (By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
Laura Dolan	
(Typed or printed name of person signing)	_
President	
(Title of person signing)	_