

P95000071120

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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04/28/15--01032--002 **35.00

15 MAY 18 PM 12:56

MAY 22 2015
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FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 6, 2015

HAYDEE VALDERRAMA / QUALITY BUSINESS SOLUTION, LLC
1229 PROVIDENCE BLVD. SUITE J
DELTONA, FL 32725 US

SUBJECT: THE HAIR ATTRACTION STUDIO, INC.
Ref. Number: P95000071120

We have received your document for THE HAIR ATTRACTION STUDIO, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document you submitted has been prepared pursuant to nonprofit statutes (chapter 617, Florida Statutes). As the entity was originally filed as a corporation for profit, this document should be filed pursuant to chapter 607, Florida Statutes.

We are enclosing the proper form(s) with instructions for your convenience.

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

Carolyn Lewis
Regulatory Specialist II

Letter Number: 315A00009336

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: THE HAIR ATTRACTION Studio, INC
DOCUMENT NUMBER: P95000071120

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

HAYDEE VALDERRAMA
Name of Contact Person
Quality Business Solutions, LLC
Firm/ Company
1229 PROVIDENCE BLVD SUITE J
Address
DELTONA, FL 32725
City/ State and Zip Code

VALDERRAMABUSINESS@YAHOO.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

HAYDEE VALDERRAMA at (386) 259-4971
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:

- | | | | |
|---|--|---|--|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$52.50 Filing Fee
Certificate of Status
Certified Copy
(Additional Copy
is enclosed) |
|---|--|---|--|

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

Street Address
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment
to
Articles of Incorporation
of

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
15 MAY 18 PM 12:56

THE HAIR ATTRACTION STUDIO, INC

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

P95000071120

(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:

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)

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:

Name of New Registered Agent

Quality Business Solution LLC

1229 PROVIDENCE BLVD SUITE J

(Florida street address)

New Registered Office Address:

DELTONA

(City)

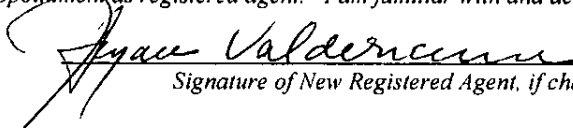
, Florida

32725

(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

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 PT John Doe

X Remove V Mike Jones

X Add SV Sally Smith

Type of Action
(Check One)

Title

Name

Address

1) ☐ Change

P

MARIA F. MARIN

530 W. LANCASTER RD

☐ Add

ORLANDO, FL 32809

☒ Remove

2) ☐ Change

VP

JUAN P. MARIN

P.O. BOX 812

☐ Add

LAUGHMAN, FL

☒ Remove

33858

3) ☐ Change

P

CARLOS A. MARIN

☒ Add

530 W. LANCASTER RD

☐ Remove

ORLANDO, FL 32809

4) ☐ Change

VP

LAURA C. CANARTE

☒ Add

530 W. LANCASTER RD

☐ Remove

ORLANDO, FL 32809

5) ☐ Change

☐ Add

☐ Remove

6) ☐ Change

☐ Add

☐ Remove

[illegible]

7

FILED
SECRETARY
DIVISION OF CORPORATIONS

The date of each amendment(s) adoption: _____
date this document was signed.

if other than the
15 MAY 18 PM 12:56

Effective date if applicable: _____

AS SOON AS POSSIBLE

(no more than 90 days after amendment file date)

Adoption of Amendment(s)

(CHECK ONE)

☒ 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.

☐ 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 cast for the amendment(s) was/were sufficient for approval

by _____."

(voting group)

☐ 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.

Dated 5/18/15

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)

MARIA F. MARIN

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)