P96000020580

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TO: Amendment Section **Division of Corporations**

NAME OF CORPORATION: DIDNIE. HAIR Studio & Interior & outdoor Service
DOCUMENT NUMBER: 49600020580
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Dionne Gayle
Dionne Hair Studio & Interior and attdoor Service Inc Firm/Company
17631 NW 27 AVE
Miami Gardens, 4 33056 Otty/ State and Zip Code
Gionne Que 43 Banail Com E-mail address: (in b) used for future annual report notification)
For further information concerning this matter, please call:
Name of Contact Jerson at (305) 620-8780 Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
S35 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed) 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

, 10 <u>C</u>) W W O O O O	if Irnovan)	
·	ocument Number of Corporation (
rsuant to the provisions of section 607.1006, Flo Articles of Incorporation:	orida Statutes, this Florida Profit	Corporation adop	its the following amendment(s)
If amending name, enter the new name of the	<u>e corporation:</u>		
			The new
me must be distinguishable and contain the Corp.," "Inc.," or Co.," or the designation "Cord "chartered," "professional association," or	Corp," "Inc," or "Co". A profe		
Enter new principal office address, if applic rincipal office address <u>MUST BE A STREET</u>			
enceput office unuress <u>recor de la ligitalia l</u>			
Enter new mailing address, if applicable:		•	
(Mailing address MAY BE A POST OFFICE	<u></u>	1	
·			
If amending the registered agent and/or reg		, enter the name	of the
new registered agent and/or the new registe	red office address:		•
Name of New Registered Agent			
· .			
	(Florida street address)		
New Registered Office Address:		, F	lorida
	(City)	\$	(Zip Code)
w Registered Agent's Signature, if changing	Registered Agent:		
ereby accept the appointment as registered age			

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	Name	Address
1) Change	VP	Jome B Bell	17631 NW 27 A4R
Add	ι.		Minmi Garden, A 330
Remove			
2) Change			·
Add			·
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			-
Remove			
5) Change			<u> </u>
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	cles, enter change(s) here: (Be specific)	٠	
			
			
		<u> </u>	
·			
		•	
f an amendment provides for an exch provisions for implementing the ame	ange, reclassification, or cancel	lation of issued shares,	
provisions for implementing the ame	idilient ii not contained in the a	mendibett tisen.	
(if not applicable, indicate N/A)			
(if not applicable, indicate N/A)			
(if not applicable, indicate N/A)			
(if not applicable, indicate N/A)			
(if not applicable, indicate N/A)			
(if not applicable, indicate N/A)			

:

The date of each amendment(s) ac	doption:	, if other than the
date this document was signed.		•
Effective date if applicable:		
	(no more than 90 days after amendment file da	ite)
Note: If the date inserted in this be document's effective date on the De	plock does not meet the applicable statutory filing requirement appartment of State's records.	ents, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the autificient for approval.	mendment(s)
	proved by the shareholders through voting groups. The follow reach voting group entitled to vote separately on the amendm	
"The number of votes cast	for the amendment(s) was/were sufficient for approval	•
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were add action was not required.	opted by the board of directors without shareholder action and	d shareholder
☐ The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder action and shareholder	reholder
Dated	1-26-2016	
Signature	honne Dayle	
	lirector, president or other officer - indirectors or officers hav	
	d, by an incorporator – if in the hands of a receiver, trustee, of ted fiduciary by that fiduciary)	r other court
••	Die Garle	
	(Typed or printed name of person signing)	
7	D special manie or person signing)	//2

(Title of person signing)