P99000050191

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SECRETARY OF STATE
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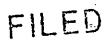
COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: Florida Barber Ad	cademy, Inc.	
DOCUMENT NUMBI	P9900050191		
	f Amendment and fee are su	bmitted for filing.	
Please return all corresp	ondence concerning this ma	tter to the following:	
C	Oouglas Licker		
_	<u> </u>	Name of Contact Person	1
F	lorida Barber Academy		
_		Firm/ Company	
5	01 E Kennedy Blvd STE	801	
_		Address	
1	ampa FL 33602		
_	<u> </u>	City/ State and Zip Cod	e
jackie.	baker@amci360.com		
	-	sed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
Jackie Baker		at (443-0745
Name of Contact Person		Area Co	de & Daytime Telephone Number
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)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Ameno Divisio Clifton	Address Iment Section on of Corporations Building Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



Florida Barber Academy, Inc.	0010 HH 20 A & 88
(Name of Corporation a	s currently filed with the Florida Dept. of State)
P99000050191	SECRETARY OF STATE
(Document	Number of Corporation (if known)IALLAHASSEE, I Communication (if known)IALLAHASSEE, I Communicat
Pursuant to the provisions of section 607.1006, Florida Statts Articles of Incorporation:	itutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corpo	ration:
	The new
name must be distinguishable and contain the word "e "Corp.," "Inc.," or Co.," or the designation "Corp," ", word "chartered," "professional association," or the abbi	corporation," "company," or "incorporated" or the abbreviation Inc," or "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRE.	<u>SS</u>)
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office.	
Name of New Registered Agent	
· · · · · · · · · · · · · · · · · · ·	(Florida street address)
New Registered Office Address:	. Florida
New Registered Office Address.	(City) (Zip Code)
New Registered Agent's Signature, if changing Register I hereby accept the appointment as registered agent. I an	red Agent: n familiar with and accept the obligations of the position.
Signatur	re 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 Do	<u>se</u>	
X Remove	<u>V</u>	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change	D		Allan S Martin	501 E Kennedy Blvd STE 801
Add				Tampa FL 33602
x Remove				
2) Change	D		Jacqueline Baker	501 E Kennedy Blvd STE 801
X Add			•	Tampa FL 33602
Remove				
3) Change				
Add				
Remove				
4) Change				
Add	•			
Remove				
5) Change				
Add				
Remove				
б) Change				
Add	-			
Remove				

f amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)				
			<u> </u>		
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			_	<u> </u>	
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				<u> </u>	
					
	 _		-		
f an amendment provides for an exch	iange, reclassificat	tion, or cancellati	on of issued shar	es,	
provisions for implementing the ame (if not applicable, indicate N/A)	ndment if not con	tained in the ame	ndment itself:		
(y nor appricable, materic 1971)					
					
	<u> </u>				
			-		
		· -			
			<u></u>	<u> </u>	
		<u>. </u>			

The date of each amendment(s) adoption:late this document was signed.	, if other than the
Effective date if applicable:	
(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, document's effective date on the Department of State's records.	this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes east for the amer by the shareholders was/were sufficient for approval.	dment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following must be separately provided for each voting group entitled to vote separately on the amendment	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by" (voting group)	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	areholder
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	older
DatedSignature	
(By a director, president or other officer – if directors or officers have nestled, by an incorporator – if in the hands of a receiver, trustee, or ot appointed fiduciary by that fiduciary)	
Douglas Licker	
(Typed or printed name of person signing)	
Chairman of the Board	
(Title of person signing)	

. . . .