

P99000111106

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

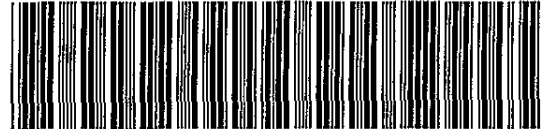
(Business Entity Name)

(Document Number)

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04/15/04--01033--013 **43.75

FILED
04 APR 15 AM 9:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

P99 000111106
NO + Amend
4-15-04
*Out copy

AMENDMENTS DEPARTMENT

Included is Articles to be Amended AND my Annual Report

PLEASE PROCESS MY ARTICLES OF AMENDMENT FIRST.

THEN PROCESS MY ANNUAL REPORT SECOND.

I WANT THE CERTIFICATE OF STATUS THAT I ORDERED TO REFLECT THE
NEW NAME OF THE COMPANY AND THE NEW DIRECTOR(S).

THANK YOU
PLEASE CALL FOR ANY QUESTIONS

LISA TALBOT-MARSHALL
305-219-2481

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Corporation Name Change & Article II Change

DOCUMENT NUMBER: P99000111106

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

Please return all correspondence concerning this matter to the following:

Lisa Talbot-Marshall
(Name of Person)

SKINVAS, INC. (LB TALBOT & ASS. INC)
(Name of Firm/ Company)

12101 S.W. 5th Court
(Address)

Pembroke Pines, FL 33025
(City/ State/ and Zip Code)

For further information concerning this matter, please call:

Judith IRIZARRY at (305) 899-5143
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☐ \$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

Street Address

Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

Articles of Amendment
to
Articles of Incorporation
of

LB TALBOT & Associates, INC.

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

P99000111106

(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:

NEW CORPORATE NAME (if changing):

SKINVAS, INC.

(must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.")

AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: **(BE SPECIFIC)**

Article VI - Directors: The Name of the Director(s)
Shall Read:

(Added) D. LISA TALBOT-Marshall

12101 S.W. 5th Court

Pembroke Pines, FL 33025

and

(Added) D. Judith ~~Hett~~ IRIZARRY

282 N.E. 117 Street

Miami, FL 33161

(Attach additional pages if necessary)

If an amendment provides for 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

(continued)

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The date of each amendment(s) adoption: 4/12/04

Effective date if applicable: 4/12/04
(no more than 90 days after amendment file date)

Adoption of Amendment(s) (CHECK ONE)

☒ The amendment(s) was/were approved 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

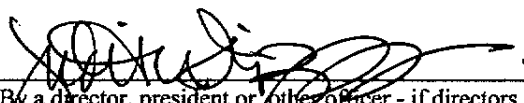
(voting group)"

☐ 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.

Signed this 12 day of April, 2004.

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)

JUDITH IRIZARRY
(Typed or printed name of person signing)

DIRECTOR
(Title of person signing)

FILING FEE: \$35