## 501283

(Re	equestor's Name)	
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## **COVER LETTER**

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TO: Amendment Section

Division of Corporations		
NAME OF CORPORATION:ACS	thetic Concepts, Inc.	
DOCUMENT NUMBER:	1783	
The enclosed Articles of Amendment and fee are s	ubmitted for filing.	
Please return all correspondence concerning this ma	atter to the following:	
00	Name of Contact Person	
	Name of Contact Person	
F	lesthotic Concepts, Inc.	
	Firm/ Company	
6895 A	Firm/Company Entland Way Apt 104 Address	
	Address	
fort.	Myers, FL 33966  City/ State and Zip Code	
<del></del> -	City/ State and Zip Code	
<b>^</b> 0	disassa Canama mailicam	
E-mail address: (to be a	dvenson Gembarg Mail. Com used for future annual report notification)	
(** ** **	,	
For further information concerning this matter, plea	ase call:	
Orlan Edvenson	at ( 239 ) 872-9169	
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 Certificate of Status	□\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy (Additional copy is enclosed) □\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Address	Street Address	
Amendment Section	Amendment Section	
Division of Corporations P.O. Box 6327	Division of Corporations Clifton Building	
Tallahassee, FL 32314	2661 Executive Center Circle	

Tallahassee, FL 32301

## **Articles of Amendment**

to

## Articles of Incorporation

	of		100	11
Aestheti	c (oncep	its, Inc.	2010	160
(Name of Corpora	tion as currently fil	led with the Florida	Dept. of State	,
.50	1283		All Stan	′ 4 th
	<u> </u>	rporation (if known)		75 81
ursuant to the provisions of section 607.1006, Florions Articles of Incorporation:	da Statutes, this Floa	rida Profit Corporati	on adopts the foll	owing amendment(s)
. If amending name, enter the new name of the	corporation:			
				The new
ame must be distinguishable and contain the we Corp.," "Inc.," or Co.," or the designation "Cor ord "chartered," "professional association," or th	rp, " "Inc, " or "Co"	. A professional co	corporated" or t rporation name n	he abbreviation nust contain the
. Enter new principal office address, if applicab Principal office address <u>MUST BE A STREET AD</u>				
	_		<del></del>	
	_			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	<u>(OX</u> )			
	-			
	-			
. If amending the registered agent and/or regist new registered agent and/or the new registered	•	in Florida, enter the	e name of the	
Name of New Registered Agent	-			
				· <del></del>
	(Florida street o	iddress)		
New Registered Office Address:			, Florida	
	(Cit	<i>y)</i>		(Zip Code)
lew Registered Agent's Signature, if changing Re	ogistored Agents			
hereby accept the appointment as registered agent.		and accept the obliga	ations of the posit	ion.
	•			
Sig	gnature of New Regi	stered Agent, if chang	ging	

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.

Mike Jones, V as Remo Example:	ive, and Sall	ly Smith, SV as an Add.	
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)	<u>Title</u>	<u>Name</u>	Address
1) Change	$\vee$	Steven Harold	N FA Myers FL 3391
Add			N FA Myers FL 3391
Kemove			
2) Change			
Add			
Remove			
3 ) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change		_	
Add			
Remove			

	al sheets, if necessary). (Be specific)
	<u> </u>
<u>.</u>	
	<u> </u>
smendm	ent provides for an exchange, reclassification, or cancellation of issued shares,
visions fo	implementing the amendment if not contained in the amendment itself:
(if not app	olicable, indicate N/A)
50	Shows of Common Stock were transferred
ron	Steven Harold to Orlan Edvenson
,	

• • •	/-	<b>-</b> /	
The date of each amendment(s) adoption:	8/15	//8	, if other than
date this document was signed.		1.00	
Effective date if applicable:	8/15/	//8	
<del></del> -	(no more than 90 day	s after amendment file dat	<i>e)</i>
Note: If the date inserted in this block does not document's effective date on the Department of		statutory filing requirement	nts, this date will not be listed as
Adoption of Amendment(s) (CH	IECK ONE)		
The amendment(s) was/were adopted by the by the shareholders was/were sufficient for a	shareholders. The num approval.	ber of votes east for the an	nendment(s)
☐ The amendment(s) was/were approved by the must be separately provided for each voting	e shareholders through v group entitled to vote s	voting groups. The follows separately on the amendm	ing statement ent(s):
"The number of votes cast for the amer	ndment(s) was/were suff	ficient for approval	
by			•
(vol	ting group)		
☐ The amendment(s) was/were adopted by the action was not required.	board of directors without	out shareholder action and	shareholder
☐ The amendment(s) was/were adopted by the action was not required.	incorporators without s	hareholder action and shar	eholder
Dated 8/29/18			
	(	_	
Signature Signature	avent		
		if directors or officers have ds of a receiver, trustee, or	
appointed fiduciary	•		
ORI	LAN EDVE	ENSON	
-	(Typed or printed name	of person signing)	
	PRESIDE	WT	
<del></del>	(Title of per	rson signing)	

the

the