## P150000 21694

(R	equestor's Name)	
(A	ddress)	
(A	ddress)	
(C	ity/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(B	usiness Entity Nar	me)
(D	ocument Number)	1
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	
	<u></u>	





400311416884

04/09/18--01023--015 \*\*35.00

S TALLENT APR 1 0 2018



Mange

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	DRATION: JOT FEET & BOD	DY MASSAGE INC	
DOCUMENT NUM	P18000021604		
The enclosed Article	es of Amendment and fee are su	abmitted for filing.	
Please return all corr	espondence concerning this ma	atter to the following:	
	lei liu		
		Name of Contact Person	1
	JOY FEET & BODY MASS	AGE INC	
		Firm/ Company	
	2095 PINE RIDGE RD	i iiii company	
	<del> </del>	Address	
	NAPLES, FL 34109		
	•	City/ State and Zip Cod	e
LEI	LIU1978@YAHOO.COM		/
		sed for future annual report	notification)
		·	,
For further informati	on concerning this matter, pleas	se call:	
CICI ZHAO		at (	633-0274
Name	e of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check	for the following amount made	payable to the Florida Depa	urtment 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)
Ar Di P.	nendment Section vision of Corporations D. Box 6327 Ilahassee, 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

ş	$\Omega$ T	FEET	Q,	BODY	MΔ	422	CF	INC
_	<b>\ J L</b>	PPPI	N.	זנונות	VI A		M IF.	III NIL.

· · · · · · · · · · · · · · · · · · ·	of Corporation as currently	filed with the Florida Dept. of S	State)	
P18000021694				
	(Document Number of	Corporation (if known)		
Pursuant to the provisions of section 607 its Articles of Incorporation:	1006, Florida Statutes, this I	Florida Profit Corporation adopts	the following amendment(	(s)
A. If amending name, enter the new name, JOY FEET & BODY MASSAGE INC	ame of the corporation:		The way	
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	nation "Corp," "Inc," or "C	Co". A professional corporation		
B. Enter new principal office address, (Principal office address MUST BE A S	if applicable:	2095 PINE RIDGE RDNAPLE	S, FL 34109	
C. Enter new mailing address, if appli	icable:			
(Mailing address MAY BE A POST		2095 PINE RIDGE RDNAPLE	S, FL 34109	
			े ु 👼	
			5	
D. If amending the registered agent an new registered agent and/or the new			the P	ر م
Name of New Registered Agent	LEI LIU			
Nume of New Registered Agent	2095 PINE RIDGE RD		~ 2	
	(Florida stre	et address)		
New Registered Office Address:	NAPLES, FL	. Flor	34109	
New Registered Office Address.		City)	(Zip Code)	
New Registered Agent's Signature, if c I hereby accept the appointment as regist		ith and accept the obligations of t	he position.	
	Signature of New P.	A Seistered 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.

i	Example: X_Change	<u>PT</u>	John De	<u>oe</u>	
	X Remove	<u>V</u>	Mike Jo	<u>ones</u>	
	X Add	<u>sv</u>	Sally S	<u>mith</u>	
	Type of Action Check One)	<u>Title</u>		Name	Address
1	) Change		_		
	Add				
	Remove				
2	2) Change		,		
	Add				
	Remove				
3	3) Change		_		
	Add				-
	Remove				
Δ	l) Change				
٦	Add	<del></del>	_	-	
	Remove				
5	Change		<del></del>		
	Add				
	Remove				
6	Change	<u></u>	_		
	Add				
	Remove				

m sorry for the wi		ry). (Be specific)				
	rong letter. I really	need change the nar	ne from JOT FEET	& BODY MASSA	GE INC to	
Y FEET & BOD'	Y MASSAGE INC		<del></del>			
			<del> </del>			
						_
·····						
<del></del>			<del></del>			
<del></del>		<del></del>				
					***************************************	<del></del>
			<del></del>		*******	
			<del></del>			
**********		****				
					•	
provisions for i	nt provides for an e implementing the s icable, indicate N/A	exchange, reclassifi amendment if not c	ication, or cancells contained in the an	ntion of issued shan nendment itself:	<u>es.</u>	
provisions for i	implementing the a	amendment if not c	ication, or cancella contained in the an	ntion of issued shan nendment itself:	·es.	
provisions for i (if not appli	implementing the a	amendment if not c	ication, or cancells contained in the an	ition of issued sha nendment itself:	·es.	
provisions for i	implementing the a	amendment if not c	ication, or cancella contained in the an	ntion of issued shan nendment itself:	res.	
provisions for i (if not appli	implementing the a	amendment if not c	ication, or cancella contained in the an	ntion of issued shanendment itself:	res,	
provisions for i (if not appli	implementing the a	amendment if not c	ication, or cancella contained in the an	ntion of issued shanendment itself:	res.	
provisions for i	implementing the a	amendment if not c	ication, or cancella contained in the an	ntion of issued shanendment itself:	res.	
provisions for i	implementing the a	amendment if not c	ication, or cancella contained in the an	ntion of issued shanendment itself:	res.	
provisions for i	implementing the a	amendment if not c	ication, or cancella contained in the an	ntion of issued shanendment itself:	res.	
provisions for i	implementing the a	amendment if not c	ication, or cancella contained in the an	ntion of issued sha nendment itself:	res,	

The date of each amendmen		, if other than the
date this document was signed	- 04/06/2018	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
	this block does not meet the applicable statutory filing requirements, this he Department of State's records.	date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
	re adopted by the shareholders. The number of votes cast for the amendmen ere sufficient for approval.	t(s)
	re approved by the shareholders through voting groups. The following states ed for each voting group entitled to vote separately on the amendment(s):	ment
	s cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/we action was not required.	re adopted by the board of directors without shareholder action and sharehol	der
☐ The amendment(s) was/we action was not required.	re adopted by the incorporators without shareholder action and shareholder	
04/06 Dated	/2018	
Signature _	Lei liu	
(1	By a director, president or other officer - if directors or officers have not bee	
	elected, by an incorporator — if in the hands of a receiver, trustee, or other coppointed fiduciary by that fiduciary)	purt
	LEI LIU	
	(Typed or printed name of person signing)	·
	manager D	
	(Title of person signing)	<del></del>