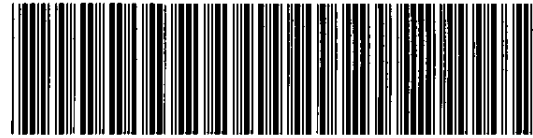


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10/26/11--01008--007 **60.00

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

A. LUNT
OCT 27 2011
EXAMINER

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TALLAHASSEE, FLORIDA

THE LAW OFFICE OF HONGWEI SHANG, LLC.

9130 S. Dadeland Blvd Suite 1620
Miami, FL 33156
Email: hshanglaw@gmail.com

Phone: (786) 581-9759
Fax: (786) 581-9168
Cell: (305) 457-6267

October 21, 2011

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

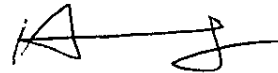
Re: Amendment to Articles of Incorporation
Applicant: Doral Oriental Massage, LLC

To Whom It May Concern:

This firm has been retained by Doral Oriental Massage, LLC to file an Amendment to its Articles of Incorporation, removing Mr. George Y. Basna as a manager of the company. Enclosed please find the amendment form, a check in the amount of \$60, and a copy of the Termination of Partnership Agreement, showing that Mr. Basna sold his shares to Ms. Yan Mueller and agreed to withdraw his name as a corporate officer and/or director of the company.

If you have any questions, please feel free to contact us.

Very truly yours,



Hongwei Shang, Esq.

Encls.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
2011 OCT 26 AM 10:00
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COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: DORAL ORIENTAL MASSAGE, LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

HONGWEI SHANG
Name of Person
THE LAW OFFICE OF HONGWEI SHANG, LLC
Firm/Company
9130 S. DADELAND BOULEVARD STE 1620
Address
MIAMI, FL 33156
City/State and Zip Code
HSHANGLAW@GMAIL.COM
E-mail address: (to be used for future annual report notification)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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For further information concerning this matter, please call:

HONGWEI SHANG at (786) 581-9759
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- \$25.00 Filing Fee
- \$30.00 Filing Fee & Certificate of Status
- \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)
- \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

DORAL ORIENTAL MASSAGE, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 03/09/2010 and assigned Florida document number L10000026363.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

FILED
2011 OCT 26 AM 10 00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: _____

New Registered Office Address: _____

Enter Florida street address

_____, Florida _____

City

Zip Code

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	BASNA, GEORGE Y	12874 SW 60 ST MIAMI FL 33183	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
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			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

STATE OF FLORIDA
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

OCT 26 AM 10 00
 FILED

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Dated October 21, 2011.

Yan Mueller
 Signature of a member or authorized representative of a member

YAN MUELLER
 Typed or printed name of signee