

#L14000053463

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

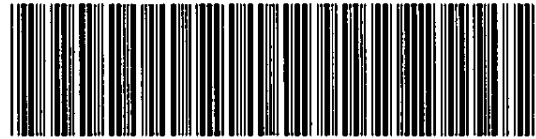
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2014 DEC 22 PM 4:05

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K. BALLY
EXAMINER
JAN - 5 2015

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Harmony Therapy South Florida 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:

Yongmei Cai

Name of Person

Youngmei Corp

Firm/Company

6724 Columbia Ave

Address

Lake Worth, FL, 33467

City/State and Zip Code

youngmeicpa@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Yongmei Cai

Name of Person

at (561)

Area Code

263 - 1258

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

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 4/1/2014 and assigned
Florida document number L14000053463.

This amendment is submitted to amend the following:

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

☒ Harmony Therapy South Florida LLC
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)

918 S Powerline Rd
Pompano Beach, FL, 33069

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

918 S Powerline Rd
Pompano Beach, FL, 33069

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:

Yongmei Cai

New Registered Office Address:

6724 Columbia Ave

Enter Florida street address

Lake Worth

City

Florida

33467

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 605, 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 Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Gilbert Jolicoeur	1001 N Federal HWY STE 327	<input type="checkbox"/> Add
		Hallendale, FL, 33009 US	<input checked="" type="checkbox"/> Remove

MGR	Xiaohong Zhao	1001 N Federal HWY STE 327	<input type="checkbox"/> Add
		Hallendale, FL, 33009, US	<input checked="" type="checkbox"/> Remove

MGR	Seok Yeon Burgess	100 Waterway Dr. Apt 108	<input checked="" type="checkbox"/> Add
		Lantana, FL, 33462-1800	<input type="checkbox"/> Remove

			<input type="checkbox"/> Add
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TALLAHASSEE, FLORIDA
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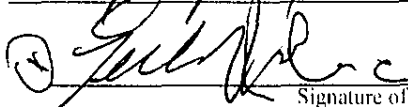
D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

E. Effective date, if other than the date of filing: _____ (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

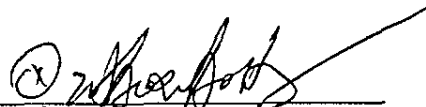
Dated

12/19/2014



Signature of a member or authorized representative of a member

Gilbert Idicœur



Xiaohong Zhao

Typed or printed name of signee

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TALLAHASSEE, FLORIDA