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2017 APR 17 AM DO: 40 SECRETARY OF STATE

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COVER LETTER

TO: Registration So Division of Con	rporations								
FOREVER	YOUNG HOLISTIC CENTE	R, LLC							
SUBJECT: CANADA CONTROL OF THE CONTR	Name of Lim	ited Liability Company							
	Amendment and fee(s) are sub	mitted for filing.							
Please return all correspo	ondence concerning this matter	to the following:							
	YUK TONG CHENG								
		Name of Person							
	FOREVER YOUNG HOLISTIC CENTER, LLC								
		Firm/Company	1,,,,,						
	101 S EOLA DR UNIT	•							
		Address							
	ORLANDO FL 32801								
		City/State and Zip Code	 						
	JACQUELINECYT@HOT								
	E-mail address: (to be used for future annual report notif	ication)						
For further information of	oncerning this matter, please co	all:							
YUK TONG CHENG		407 408-9261 at ()							
Name o	f Person		Telephone Number						
Enclosed is a check for the	he 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

FILED 2017 APR 17 AM 10: 50 SECRETARY OF STATE ALLAHASSEE, FLORIDA

FOREVER YOUNG HOLISTIC CENTER, 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 04/01/2017 Florida document number _L17000071744 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 contain 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) 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

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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>		Address	Type of Action
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Page 3 of 3

Filing Fee: \$25.00