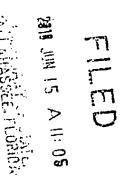
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COVER LETTER

TO: Registration Section .. Divisiow of Corporations BOBO'S FACIAL BODY SPA, LLC Name of Limited Liability Company Dear Sir or Madam: The enclosed Statement of Correction and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: CUIHONG ZHOU Name of Person BOBO'S FACIAL BODY SPA, LLC Firm/Company 951 CHARLES ST Address WEST PALM BEACH, FL 33401 City/State and Zip Code BOBOCHOW 184 @ YAHOO. COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: CUIHONG ZHOU Name of Person STREET/COURIER ADDRESS: MAILING ADDRESS: Registration Section Registration Section Division of Corporations Division of Corporations Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, Florida 32314 Tallahassee, Florida 32301

Enclosed is a check for the following amount:

\$25 Filing Fee

S30 Filing Fee & Certificate of Status

S55 Filing Fee & Certified Copy

S60 Filing Fee. Certificate of Status & Certified Copy

CR2E062 (9/15)

STATEMENT OF CORRECTION FOR FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

Pursuant to section 605.0209. F.S., this document is being submitted to correct a previously filed document. FIRST: The name of the limited liability company is: BOBO'S FACIAL BODAY SPA, LLC The Florida Document number of the limited liability company is: $\underline{L}18000135991$ SECOND: Document to be corrected is: ARTICLES OF ORGANIZATION THIRD: (CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows: BOBO'S FACIAL BODAY SPA. LLC CONTAINS SPELLING ERROR, PLEASE CORRECT TO: BOBO'S FACIAL BODY SPA, LLC <u>OR</u> Was defectively signed. The manner in which the document was defectively signed and the appropriate correction and as follows: <u>OR</u> П The electronic transmission of the record was defective. Signature of Authorized Representative Signature of new registered agent, if applicable :(NOTE: if correcting the registered agent, the new registered agent must sign accepting the designation). New Registered Agent's Signature, it 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. Registered Agent's Signature Filing Fee: \$25.00

Certified Copy:

\$30.00 (optional)