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R. Vyenia

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORA	ATION: BODY & SOUL I	DAY SPA SE, II	NC.	
DOCUMENT NUMBI	P03000129311			
The enclosed Articles of	f Amendment and fee are su	abmitted for filin	g.	
Please return all corresp	ondence concerning this ma	tter to the follow	ving:	
(	GHIRCA, OVIDIU P			
_		Name of Co	ntact Perso	n
E	ODY & SOUL DAY SPA	SE, INC.		
_		Firm/ Co	ompany	
2	024 NE 36 STREET			
-		Add	ress	
L	IGHTHOUSE POINT, FL.	33064		
_		City/ State ar	nd Zip Cod	e
		•	•	
	E-mail address: (to be us	and for future on		matification)
	E-man address, (to be us	sed for future an	пиат герогі	notification)
For further information	concerning this matter, pleas	se call:		
GHIRCA, OVIDIU P		at (	054	980-3031
Name of	Contact Person			de & Daytime Telephone Number
Enclosed is a check for t	he following amount made	payable to the F	orida Depa	artment of State:
n \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filis Certified Co (Additional enclosed)	ору	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
	ng Address dment Section			Address Iment Section
Divisi	Division of Corporations			
P.O. E	Clifton Building			
Tallah	2661 Executive Center Circle Tallahassee, FL 32301			

## Articles of Amendment to Articles of Incorporation of

16 JUN -6 AM 8:38

BODY & SOUL DAY SPA SE, INC. (Name of Corporation as currently filed with the Florida Dept. of State) P03000129311 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.." or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS ) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered 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.

Example: X Change	<u>PT</u>	John Doe			
X Remove	<u>V</u>	Mike Jones			
_X Add	<u>sv</u>	Sally Smith			
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s		
1) Change	VP	Kristin Goodrich	3110 Marion Ave		
X Add			Margate, FL 33063		
Remove					
2) Change		_			
Add					
Remove			<del></del>		
3)Change					
Add			<del></del>		
Remove					
4) Change					
Add					
Remove					
5) Change		_			
Add					
Remove					
6) Change					
Add					
Remove					

If amending or adding additional Arti (Attach additional sheets, if necessary).	cles, enter change(s) he (Be specific)	<u>re</u> :		
			<del></del>	
		***		
	· · · · · · · · · · · · · · · · · · ·			
1				
If an amendment provides for an exch	ange, reclassification, o	r cancellation of iss	ued shares,	
(if not applicable, indicate N/A)	dment if not contained	in the amendment	<u>itself:</u>	

	06/02/2016	
The date of each amendment(s date this document was signed.		, if other than the
Effective date <u>if applicable</u> : _		
Effective date <u>ir applicable</u> .	(no more than 90 days after amendment file date)	
Note: If the date inserted in the document's effective date on the	is block does not meet the applicable statutory filing requirements, this date will be Department of State's records.	I not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) e sufficient for approval.	
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	
	east for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder	
Dated	(e/2/16	
Signature		_
sele	a director, president or other officer – if directors or officers have not been ected, by an incorporator – if in the hands of a receiver, trustee, or other court ointed fiduciary by that fiduciary)	
	GHIRCA, OVIDIU P	
	(Typed or printed name of person signing)	<del></del>
	President	
	(Title of person signing)	