## P04000082241

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DR 1/20/15

## **COVER LETTER**

Division of Corporations NAME OF CORPORATION: DONG YE ACUPUNCTURNE & CHINESE MEDICINE, INC. DOCUMENT NUMBER: P04000082241 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: SUSAN HATHAWAY Name of Contact Person DONG YE ACUPUNCTURE & CHINESE MEDICINE, INC. Firm/ Company 2105 PALM BAY ROAD NE, STE 2 Address **PALM BAY, FL 32905** City/ State and Zip Code For further information concerning this matter, please call: SUSAN HATHAWAY Area Code & Daytime Telephone Number Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: ■ \$35 Filing Fee □\$43.75 Filing Fee & **□\$43.75** Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed)

**Mailing Address** 

TO: Amendment Section

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## Articles of Amendment 5.

Articles of Incorporation

FILED.

DONG VE ACUBUNCT	of	MEDIO	المراجعة المراجعة	PM 3: 29	
DONG YE ACUPUNCTU	JRE & CHINESE	MEDICI	THE IME!		
	currently filed with the Flo	<u>rida Dept. of</u>	State)	Y OF STATE SEE. FLORIDA	7
P040000822#1			TALLAHAS	<u> </u>	
(Documen	t Number of Corporation (if I	(nown)	<b>10</b> at		·
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this F	orida Profit (	Corporation adop	ots the following	; amendment(s) t
A. If amending name, enter the new na	me of the corporation:				
DONG YO ACUPUNCTL	JRE & CHINESE !	MEDICIN	IE, INC.		The new
name must be distinguishable and cont "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associate	ation "Corp," "Inc," or "C	o". A profes.	" or "incorpora sional corporation	ited" or the ab	breviation
B. Enter new principal office address, (Principal office address MUST BE A ST		N/A			
C. Enter new mailing address, if appli (Mailing address <u>MAY BE A POST (</u>		N/A			
D. If amending the registered agent an new registered agent and/or the new		ss in Florida,	enter the name	of the	
Name of New Registered Agent	N/A				
	(2)	<del></del>	·		
New Registered Office Address:	(Florida stree	i address)	, Florida		
	(City)			(Zip Code)	
New Registered Agent's Signature, if cl I hereby accept the appointment as regist		th and accept	the obligations o	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			
Add Add			
Remove			
2) Change			
Add			
Remove			
3) Change		_	
Add			•
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
Character Character			
6) Change			
Add			
Remove			

•	icles, enter change(s) here: (Be specific)
/A	
<del> </del>	
	<del> </del>
If an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, andment if not contained in the amendment itself:
provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, andment if not contained in the amendment itself:
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The date of each amendment date this document was signed	(s) adoption: JANUARY 1, 2015	, if other than the
_	JANUARY 1, 2015	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	- <del>-</del>
Adoption of Amendment(s)	(CHECK ONE)	
	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.	
	re approved by the shareholders through voting groups. The following statement ed for each voting group entitled to vote separately on the amendment(s):	
"The number of votes	s cast for the amendment(s) was/were sufficient for approval	
by	77	
	(voting group)	
action was not required.	re adopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/we action was not required.	re adopted by the incorporators without shareholder action and shareholder	
Dated	1/12/15	
Signature	Augus Hother	
	y a director, president or other officer if directors or officers have not been elected, by an incorporator – if in the hands of a receiver, trustee, or other court	
	ppointed fiduciary by that fiduciary)	
	SUSAN HATHAWAY	
	(Typed or printed name of person signing)	_
	PRESIDENT	
	(Title of person signing)	<del></del> ·