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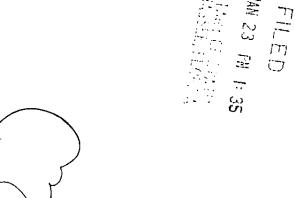
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Oriental He	ealing Therapy, Inc.
DOCUMENT NUMBER: P060001177	
The enclosed Articles of Amendment and fee are	submitted for filing.
Please return all correspondence concerning this	matter to the following:
Sang N. Harris	
 	Name of Contact Person
-	Firm/ Company
800 N. Ferncre	ek Ave. 1 Orlando Fl 32803
	City/ State and Zip Code
sangharris@aol.co	m ·
E-mail address: (to be	e used for future annual report notification)
For further information concerning this matter, pl	lease call:
Sang N. Harris	at (407) 8956036
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount ma	de payable to the Florida Department of State:
■ \$35 Filing Fee	•
Mailing Address 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 to Articles of Incorporation of

Oriental Healing Therap	y, Inc.		
<u></u>	s currently filed with the Florida Dept. of	'State)	
P06000117799			
(Documen	nt Number of Corporation (if known)		
Pursuant to the provisions of section 607 its Articles of Incorporation:	1006, Florida Statutes, this <i>Florida Profit</i> (Corporation adopts the following	amendment(s) to
A. If amending name, enter the new na	ame of the corporation:		
			The new
	tain the word "corporation," "company, nation "Corp," "Inc," or "Co". A profes. tion," or the abbreviation "P.A."		
B. Enter new principal office address,			· _x
(Principal office address <u>MUST BE A S</u>	TREET ADDRESS)	। क्	<i>5</i> .
		The state of the s	E T
			23
C. Enter new mailing address, if appli			[T]
(Mailing address <u>MAY BE A POST</u>	OFFICE BOX)		R O
			• •
		• • • • • • • • • • • • • • • • • • • •	G)
B. 10			
D. It amending the registered agent an new registered agent and/or the new	d/or registered office address in Florida, w registered office address:	enter the name of the	
	Joseph E. Fernandez		
Name of New Registered Agent	2323 Golf Lake Circle, #	1110	
	(Florida street address)	1112	
	Melbourne	32935	
New Registered Office Address:	(City)	, Florida 32935 (Zip Code)	
	(0.0)	(Esp Goue)	
New Registered Agent's Signature, if			
I hereby accept the appointment as regist	ered agent—I am familiar with and accept	the obligations of the position.	
Geo	My Member by		
// A	gnature of New Registered Agent, if changing	1g	
U			

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	DPS	Thomas Grace	1195 Lake Rogers Circle
Add			Oviedo, FL 32765
Remove			
2) Change	DPS	Joseph E. Fernandez	2323 Golf Lake Circle
Add			Apt. 1112
Remove			Melbourne, FL 32935
3) Change			_
Add			
Remove			
4) Change			_
Add	<u>-</u> -		
Remove			
5) Change			
Add			
Remove			
6) Change			
			_
Add			
Remove			

	ch additional sheets, if necessary). (Be specific)		
					
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pro	amendment provides for an evisions for implementing the avisions applicable, indicate N/A	<u>nendment if no</u>	sification, or can t contained in t	ncellation of issume the amendment it	ed shares, self:
pro	visions for implementing the a	<u>nendment if no</u>	sification, or can t contained in t	ncellation of issume the amendment it	ed shares. self:
pro	visions for implementing the a	<u>nendment if no</u>	sification, or cal t contained in t	ncellation of issuche amendment it	ed shares. self:
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pro	visions for implementing the a	<u>nendment if no</u>	sification, or can t contained in t	ncellation of issume the amendment it	ed shares, self:
pro	visions for implementing the a	<u>nendment if no</u>	ification, or can	ncellation of issue	ed shares, self:

The date of each amendment(s) adoption: Dec. 31, 2013	, if other than the
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by"	
(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated December 31, 2013	
Dated	
Signature Man Manuary	
(By a director, president or other officer - if directors or officers have not been	
selected, by an incorporator - ikin the hands of a receiver, trustee, or other court	
appointed fiduciary by that fiduciary)	
Joseph Fernandez	
(Typed or printed name of person signing)	
Director	
(Title of person signing)	_