Po700083612

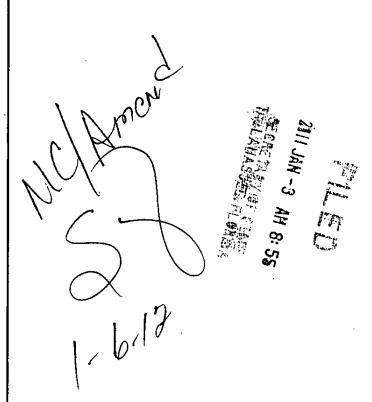
(Re	questor's Name)	
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(Cit	y/State/Zip/Phon	e #)
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COVER LETTER

TO: Amendment Section Division of Corporations	
NAME OF CORPORATION:	Sole' Spa Inc.
DOCUMENT NUMBER:	P07000083612
The enclosed Articles of Amenda	nent and fee are submitted for filing.
Please return all correspondence	concerning this matter to the following:
	Diana Manzanu & Giovanni Manzand Name of Contact Person
	Sole' Spa Inc. Firm/Company
1095	7th Street South
	Address
Jackso	onville Beach, Fi 32250
 -	City/ State and Zip Code
Sol	eSpaInc@yanoo.com
	dress: (to be used for future annual report notification)
For further information concerning	ng this matter, please call:
Diana Manza	ano $at(904)$ 505 1283
Name of Contact Person	
Enclosed is a check for the follow	ving amount made payable to the Florida Department of State:
\$35 Filing Fee \$43.75 Fil Certificate	
Mailing Address	Street Address
Amendment Section	Amendment Section
Division of Corporations P.O. Box 6327	Division of Corporations Clifton Building
Tallahassee, FL 32314	2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

orporation
the Florida Dept. of State)
-
ion (if known)
es, this Florida Profit Corporation adopts the following
<u>n:</u>
Certer Inc. The new poration," "company," or "incorporated" or the porp," "Inc," or "Co". A professional corporation ation," or the abbreviation "P.A."
Jacksonville Beach, TI
32-250
1095 Th Street S. Jacksonville Beach, Fi 32250

D. <u>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:</u>

Name of New Registered Agent:		
New Registered Office Address:	(Florida street d	address)
_		, Florida
	(City)	(Zip Code)

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

removed and title, name, and address of each Officer and/or Director being added: (Attach additional sheets, if necessary) Title **Type of Action** Name Address ☐ Add ☐ Remove ☐ Add ☐ Remove E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific) F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)

If amending the Officers and/or Directors, enter the title and name of each officer/director being

The date of each amendment	(s) adoption: 01-01-12
	(s) adoption: $\frac{O1 - O1 - I + O1}{(date \ of \ adoption \ is \ required)}$
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
The amendment(s) was/wer by the shareholders was/we	re adopted by the shareholders. The number of votes cast for the amendment(s) are sufficient for approval.
	c approved by the shareholders through voting groups. The following statemend for each voting group entitled to vote separately on the amendment(s):
"The number of votes of	east for the amendment(s) was/were sufficient for approval
by	."
· · · · · · · · · · · · · · · · · · ·	(voting group)
action was not required.	e adopted by the board of directors without shareholder action and shareholder e adopted by the incorporators without shareholder action and shareholder
DatedSignature(By selec	a director, president or other officer – if directors or officers have not been cted, by an incorporator – if in the hands of a receiver, trustee, or other court binted fiduciary by that fiduciary)
	Tiana Widnzano (Typed or printed name of person signing)
-	(Title of person signing)