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SECRETARY OF STATE A SIVISION OF CORPORATIONS

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COVER LETTER

TO: Amendment Section **Division of Corporations** Zen Spa Services, Inc NAME OF CORPORATION: **DOCUMENT NUMBER:** The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: John Fetko Name of Contact Person Firm/ Company 1455 90th Ave. Lot A22 Address Vero Beach, Fl, 32966 City/ State and Zip Code jbfctko@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (321) 237-337.

Area Code & Daytime Telephone Number John Fetko Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: ☐\$43.75 Filing Fee & **□\$43.75** Filing Fee & □\$52.50 Filing Fee \$35 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy (Additional Copy enclosed) is enclosed)

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

Zen Spa Services, Inc			五多	\ \ \
	of Corporation as curren	ntly filed with the Florida Dept. of State)	27	CON
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	(Document Number	of Corporation (if known)	Ġ.	
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, thi	is Florida Profit Corporation adopts the follo		٨
A. If amending name, enter the new n	ame of the corporation:			
			The no	ew
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associations of the contract of t	nation "Corp," "Inc," or	ion," "company," or "incorporated" or the "Co". A professional corporation name ms "P.A."	e abbreviati ust contain t	on he
B. Enter new principal office address.	if annlicable:	N/A		
(Principal office address MUST BE A S				••
				-
				-
C. Enter new mailing address, if appl (Mailing address MAY BE A POST		N/A		_
				•
D. If amending the registered agent ar	nd/or registered office ad	dust in Florida outer the name of the		-
new registered agent and/or the ne				
Name of New Registered Agent	John Fetko			
	1455 90th Ave, Lot A22		-	
	(Florida s	treet address)		
New Registered Office Address:	Vero Beach	32960 Florida	5	
			Zip Code)	•
New Registered Agent's Signature, if c	honolug Desistand Ages			
		<u>us.</u> with and accept the obligations of the position	n.	
	DI &	1		
	Signature of Now	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.

X Change	PT Jol	nn Doe	
X Remove	<u>V Mi</u>	ke Jones	
X Add	SV Sai	lly Smith	
Type of Action (Check One)	Title	Name	Address
1)Change	P	Jared Lewis Fetko	412 Lincoln Ave
Add			Cape Canaveral,Fl 32920
X Remove			
2) Change	<u>P</u>	John Fetko	1455 90th Ave, Lot A22
X Add			Vero Beach, Fl 32966
Remove			**************************************
3)Change	 		
Add			
Remove			
4) Change			
Add			-
Remove			
5) Change			
Add			· · · · · · · · · · · · · · · · · · ·
Remove			
6) Change			
Add	 		
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)		
N/A		
···		
,		
~ ,		
 		
		
F. <u>K</u>	an amendment provides for an exchange, reclassification, or cancellation of issued shares.	
<u>D</u>)	rovisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	
N/A		
* 1		

• . •	N/A	
The date of each amendment(s)	adoption:	, if other than the
date this document was signed.		
	/A	
Effective date if applicable:	(no more than 90 days after amendment file date)	
	(no more man 50 days after amenament fue atte)	
Note: If the date inserted in the document's effective date on the	s block does not meet the applicable statutory filing requirements, this dat Department of State's records.	e will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s 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):	nt
"The number of votes of	ast for the amendment(s) was/were sufficient for approval	
by	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
•	(voting group)	
The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and shareholde	r
The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder	
Dated	1-18-2017	
Signature		
	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	ţ
app	ointed fiduciary by that fiduciary)	
	Jared Lewis Fetko	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	