## P08000099043

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A. RAMSEY

JAN 2 4 2022

## COVER LETTER

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	ORATION: ASIAN HEALTH	Y CENTER IN	IC			
DOCUMENT NUM	POSOCOGONAS	•-				
The enclosed Article	es of Amendment and fee are su	ibmitted for fil	ing.			
Please return all cor	respondence concerning this ma	tter to the folk	owing:			
	PING H CHOU, CPA					
		Name of C	ontact Person	n		
	PING H CHOU, CPA, PA					
		Firm/ (	Company	<u></u>		
	7325 NW 112th TERRACE					
		Ad	dress			
	PARKLAND, FL 33076					
		City/ State	and Zip Cod	e		
	stevechou.cpa@outlook.com	•				
	E-mail address: (to be us		nnual report	potification)		
For further informat	ion concerning this matter, plea		954	) <del>621-8518</del>		
Name		Area Co	de & Daytime Telephone Number			
Enclosed is a check	for the following amount made	payable to the	Florida Dep	artment of State:		
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Fi Certified ( (Additiona enclosed)	Copy I copy is	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Mailing Address				Address		
	nendment Section vision of Corporations		Amendment Section			
	Division of Corporations					
	P.O. Box 6327 Tallahassee, FL 32314			The Centre of Tallahassee 2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

POZZ JAN-3 AMILIO

ASIAN HEALTHY CENTER INC.

(Name of Corpora	tion as currently filed with the Florid	a Dépt., of State)
P08000099043		36-725
(Doct	ument Number of Corporation (if known	)
Pursuant to the provisions of section 607.1006, Flori its Articles of Incorporation:	da Statutes, this <i>Florida Profit Corpora</i>	tion adopts the following amendment(s) to
A. If amending name, enter the new name of the	corporation:	
name must be distinguishable and contain the word " "Inc.," or Co.," or the designation "Corp," "Inc "chartered," "professional association," or the abb.	"," or "Co". A professional corporal	The _ new rated" or the abbreviation "Corp.," rion name must contain the word
B. Enter new principal office address, if applicab (Principal office address <u>MUST BE A STREET AD</u>		
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE B</u>	<u>OX</u> j	
D. If amending the registered agent and/or registence new registered agent and/or the new registered.	ered office address in Florida, enter th	ne name of the
Name of New Registered Agent	a office address:	
	(Florida street address)	
New Registered Office Address:	(City)	, Florida
	·	121p Code)
New Registered Agent's Signature, if changing Re hereby accept the appointment as registered agent.	gistered Agent: I am familiar with and accept the oblig	ations of the position.
Sign	nature of New Registered Agent, if chang	ing

Check if applicable

 $\square$  The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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	PT	John Doe	
X Remove	Y	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	PT	XU. YUYAO	2615 S UNIVERSITY DR
Add			DAVIE, FL 33328
X Remove			
2) Change	PT	YUMELXIE	2615 S UNIVERSITY DR
XAdd			DAVIE, FL 33328
Remove 3) Change			
Add			
Remove			
4) Change			
Add			<del>-</del>
Remove			
5/ Change			
Add			
Remove			<del></del>
6) Change		-	
Add			
Remove			

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n amendment provides for an excl	nange, reclassific	ation, or cancel	lation of issued	shares,	
ovisions for implementing the ame (if not applicable, indicate N/A)	endment if not co	ntained in the a	<u>imendment itse</u>	<u>II:</u>	
(if not applicable, makake 1974)					
				•	
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				-	
		-			

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, , ,	January 1st. 2022	, if other than the
date this document was signed.	loption:	, II office than the
Janu	ary 1st, 2022	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
<b>Note:</b> If the date inserted in this b document's effective date on the De	lock does not meet the applicable statutory filing requirements, partment of State's records.	this date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
☐ The amendment(s) was/were ado action was not required.	pted by the incorporators, or board of directors without sharehold	er action and shareholder
The amendment(s) was/were ado by the shareholders was/were su	opted by the shareholders. The number of votes east for the amend fficient for approval.	dment(s)
☐ The amendment(s) was/were app must be separately provided for	proved by the shareholders through voting groups. The following each voting group entitled to vote separately on the amendment(s	statement ():
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
bv	(yoting group)	
	(voting group)	
December I Dated	28, 2021 Anns	
selecte	irector, president or other officer – if directors or officers have no d, by an incorporator – if in the hands of a receiver, trustee, or oth ted fiduciary by that fiduciary)	t been er court
	XU, YUYAO	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	