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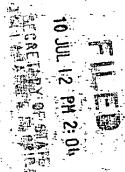
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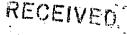


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SECRETARY OF STATE



FLORIDA DEPARTMENT OF STATE Division of Corporations

June 30, 2010

XINLI TIAN NEW MASSAGE OF ASIA INC 7159 SW 8 STREET MIAMI, FL 33144

 SUBJECT: NEW MASSAGE OF ASIA INC Ref. Number: P09000050854

We have received your document and check(s) totaling \$35.00.1 However, the enclosed document has not been filed and is being returned to you for the following reason(s):

Please provide us with an email address for this business entity. The Division of Corporations sends important reminders and notices to those business entities that have provided our office with an email address. Make sure your entity receives these helpful communications by providing our office with an active email address.

If the corporation is a **PROFIT** corporation it must be signed by a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.

If the corporation is a **NOT FOR PROFIT** corporation it must be signed by the chairman or vice chairman of the board, president or other officer—if directors have not been selected, by an incorporator—if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.

The current name of the entity is as referenced above. Please correct your document accordingly.

PLEASE REMOVE THE PICTURE OF THE DRIVERS LICENSE AS THIS DOCUMENT WILL BE SHOWN ON THE INTERNET.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6906.

Darlene Connell Regulatory Specialist II

Letter Number: 110A00016042

COVER LETTER

Division of Corporations	
NAME OF CORPORATION:	NEW MASSAGE OF ASIA INC.
DOCUMENT NUMBER:	P09000050854
The enclosed Articles of Amendment a	and fee are submitted for filing.
Please return all correspondence concer	erning this matter to the following:
	Name of Contact Person
	NEW MASSAGE OF ASIA, WC. Firm/ Company 7159 SW8 STREET
	Address MIAMI, FL 33144
	City/ State and Zip Code Yiu 28 Jo 28 @ adl. com
For further information concerning this Toseft Leung Name of Contact Person	at (305) 933 - 9515
Enclosed is a check for the following as	amount made payable to the Florida Department of State:
\$35 Filing Fee \$43.75 Filing Fee Certificate of Sta	
Mailing Address Amendment Section Division of Corporations	Street Address Amendment Section Division of Corporations.
P.O. Box 6327 Tallahassee, FL 32314	Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

NEW MASSAGE OF ASIA

(Name of Corporation as currently filed with the Florida Dept. of State)

(Document Number of Corporation (if known)

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

	- 			The no
ame must be distinguishable and contain bbreviation "Corp.," "Inc.;" or Co.;"-or th ame must contain the word "chartered," "pr	e designation "Co	orp, "-"Inc," o	r_"Co" A_profe	essional corporati
. Enter new principal office address, if ap				 .
Principal office address <u>MUST BE A STRE</u>	ET ADDRESS)	^	1/4	
Enter new mailing address, if applicabl (Mailing address MAY BE A POST OFF		7159	SW 8	STREET 33144
		MIAM	I, FL	33144
. If amending the registered agent and/or			orida, enter the	name of the
new registered agent and/or the new reg		•		
Name of New Registered Agent:	XINI	-1 TIA	M	• •
	7159		STREET	
New Registered Office Address:	<u> </u>	da street addr	ess)	
	- MI	AMI	Flor	ida 33144
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lew Registered Agent's Signature, if chang	ing Dogistored A	gent.	•	
hereby accept the appointment as registered			accept the obligat	ions of the positio
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 	C: CM	n - 22-4-4-4-5	ent, if changing	

(Attach additional sheets, if necessary) Address Type of Action ☐ Remove ☐ Add ☐ Remove ☐ 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

removed and title, name, and address of each Officer and/or Director being added:

The date of each amendment(: ⁻ :
Effective date if applicable:	(date of adoption is required)	
Entective date in appareaute.	(no more than 90 days after amendment file date)	-
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were by the shareholders was/were	e adopted by the shareholders. The number of votes cast for the amendment re sufficient for approval.	nt(s)
	e approved by the shareholders through voting groups. The following state if for each voting group entitled to vote separately on the amendment(s):	emen :
"The number of votes c	ast for the amendment(s) was/were sufficient for approval	
	(voting group) e adopted by the board of directors without shareholder action and shareho	older
action was not required.	·	
The amendment(s) was/were action was not required.	e adopted by the incorporators without shareholder action and shareholder	
Dated -	JUNE 20, 2010	
Signature (Olin Son Mou	•
(By select	a director, president or other officer – if directors or officers have not been sted, by an incorporator – if in the hands of a receiver, trustee, or other couninted fiduciary by that fiduciary)	
	XINLI TIAN	
	(Typed or printed name of person signing)	
	PREGIDENT	
	(Title of person signing)	-