## P100000 76901

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SECRETARY OF STATE

MAY 16 2017 T. LEMIEUX M.

## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: TROPICAL SPA IN	1C						
DOCUMENT NUM	D10000076001							
The enclosed Articles	of Amendment and fee are sub	mitted for filing.						
Please return all corre	spondence concerning this matt	er to the following:						
	ANGELINA C. LI							
	Name of Contact Person							
	JAL ACCOUNTING P.A.							
		Firm/ Company						
	3363 SHERIDAN STREET STE 214							
		Address						
	HOLLYWOOD, FL 33021							
		City/ State and Zip Code	<u> </u>					
ANC	GEL@JALACCOUNTING.CO	M						
	•	ed for future annual report	notification)					
For further information	on concerning this matter, please	e call:						
JUN LI		at (	963-6606					
Name	of Contact Person	Area Code & Daytime Telephone Number						
Enclosed is a check for	or the following amount made p	ayable to the Florida Depa	artment of State:					
□ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)					
Mailing Address		Street Address						
	nendment Section	Amendment Section						
	vision of Corporations D. Box 6327	Division of Corporations Clifton Building						

Tallahassee, FL 32314

2661 Executive Center Circle Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

TROPICAL SPA INC (Name of Corporation as currently filed with the Florida Dept. of State) P10000076901 (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: A. If amending name, enter the new name of the corporation: NONE The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A. NONE B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: NONE (Mailing address MAY BE A POST OFFICE BOX) D. 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: JUN LI Name of New Registered Agent 2921 STIRLING ROAD (Florida street address) HOLLYWOOD New Registered Office Address: (City) 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

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	<u>v</u>	Mike Jones					
X Add	<u>sv</u>	Sally Smith					
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>				
1) Change	P	YU, WAN HUA	2921 STIRLING ROAD				
Add			HOLLYWOOD, FL 33312				
X Remove			·				
2) Change							
Add							
Remove							
3) Change							
Add							
Remove							
4) Change	-						
Add							
Remove							
5) Change	_						
Add							
Remove							
6) Change							
Add			<del></del>				
Remove							

E. <u>If amend</u> (Attach <i>at</i>	<mark>ling or addi</mark> dtlitional she	ng additions eets, if neces:	al Articles, sary). (Be	enter chan: e specific)	ge(s) here:				
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<u>provisi</u>	nendment pr	lementing th	<u>1e amendm</u>	e, reclassific ent if not co	cation, or ca	incellation the amend	of issued sh ment itself:	ares,	
	not applicab	ole, indicate i	N/A)						
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	05/01/2017	Se all a de la contraction de
The date of each amendment date this document was signed	(5) 445 (100 110 110 110 110 110 110 110 110 11	, if other than the
Effective date <u>if applicable</u> :	05/01/2017	
енесиче часе <u>и арунсаріс</u> .	(no more than 90 days after amendment file date)	
	this block does not meet the applicable statutory filing requirements, this che Department of State's records.	date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
☐ The amendment(s) was/we by the shareholders was/w	re adopted by the shareholders. The number of votes cast for the amendmen ere sufficient for approval.	ı(s)
☐ The amendment(s) was/we must be separately provide	re approved by the shareholders through voting groups. The following states ed for each voting group entitled to vote separately on the amendment(s):	nent
	s cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
■ The amendment(s) was/we action was not required.	re adopted by the board of directors without shareholder action and sharehol	der
☐ The amendment(s) was/we action was not required.	re adopted by the incorporators without shareholder action and shareholder	
Dated_	JUN 12 5/3/201	17
Signature 🖰	By a director, president or other officer – if directors or officers have not bee	
S	elected, by an incorporator — if in the hands of a receiver, trustee, or other coppointed fiduciary by that fiduciary)	
	JUN LI	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	