P110000027428

(Requestor's Name)				
(Address)				
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(Business Entity Name)				
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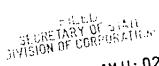
COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: MOMO SPA HEA	LTH & THERAPY, INC.	
DOCUMENT NUMI		- 100	
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	GEORGE GROSHEIM		
		Name of Contact Persor	1
	ACCOUNTING SERVICES	OF SO, FL.	
		Firm/ Company	
	901 S E 7TH CT	Time Company	
		Address	
	DEERFIELD BEACH, FL. 3	33441	
		City/ State and Zip Code	e
GPE	NCILPUSHER@AOL.COM		
	_	sed for future annual report	notification)
		-	
For further informatio	n concerning this matter, pleas	se call:	
GEORGE GROSHEI	М	954 at (de & Daytime Telephone Number
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	artment of State:
□ \$35 Filing Fee	S43.75 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)
Amo Divi P.O	ling Address endment Section ision of Corporations Box 6327 ahassee, FL 32314	Amend Divisio Clifton	Address Iment Section on of Corporations Building executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



MOMO SPA HEALTH & THERAPY, INC.

2016 AUG 15 AM 11:02

(Name o	of Corporation as currently	filed with the Florida Dept. of State)
P11000027428		
	(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this A	Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new na	ame of the corporation:	
		The new
	nation "Corp," "Inc," or "(n," "company," or "incorporated" or the abbreviation Co". A professional corporation name must contain the P.A."
B. Enter new principal office address, Principal office address <u>MUST BE A S</u>		
C. Enter new mailing address, if appli (Mailing address MAY BE A POST)		
D. If amending the registered agent an		
new registered agent and/or the nev	w registered office address:	
Name of New Registered Agent	ZHANG CHONGAI	
	2751 W ATLANTIC BLV	D, SUITE 202
	(Florida stre	et address)
New Registered Office Address:	POMPANO BEACH	, Florida 33069
New Registered Office Tuaness.	·	(Zip Code)
New Registered Agent's Signature, if c		
hereby accept the appointment as regist	ered agent. I am familiar w	ith and accept the obligations of the position.
	how Chazai	
	Signature of New R.	egistered 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.

Mike Jones, V as Kemove	, ana Sai	iy Smun, Sv as an Aaa.	
Example: X Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	PD	MEI QIN JIANG	14045 N FOREST OAK CIR
Add	-		DAVIE, FL. 33325
X Remove			
2) Change	PSTD	ZHANG CHONGAI	2751 W ATLANTIC BLVD
X Add			SUITE 202
Remove			POMPANO BEACH, FL. 33069
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

A	al sheets, if nece	· · · · · · · · · · · · · · · · · · ·					
							
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If an amendme	nt provides for	an exchange, r	eclassificatio	n, or cancellati	ion of issued	shares,	
	implementing (<u>t if not contai</u>	ned in the ame	<u>ndment itsel</u>	<u>f:</u>	
* * * * * * * * * * * * * * * * * * * *			IN HANG TO	ZUANG CHO	NO ALEPPE	TOTALE DALAC	
U% OF SHARE	S WERE SOLD	FROM MEI Q	IN JIANG TO	ZHANG CHO	NGAI EFFE	211VE 8/1/16	
			-				
			· · · · · · · · · · · · · · · · · · ·				
	·						

· · · The date of each amendment(s)	8/1/16		_, if other than
date this document was signed.	auopuon.	ruck	
	, 1/16	SECRETARY C SECRETARY C SIVISION OF COR	ห้อสี่สีใช้
Effective date <u>if applicable</u> :	(no more than	190 days after amendment file date 2016 AUG 15	
Note: If the date inserted in this locument's effective date on the l		olicable statutory filing requirements, this date will	not be listed as
Adoption of Amendment(s)	(<u>CHECK ONE</u>)		
The amendment(s) was/were a by the shareholders was/were		The number of votes cast for the amendment(s)	
		hrough voting groups. The following statement to vote separately on the amendment(s):	
"The number of votes ca	ast for the amendment(s) was/w	vere sufficient for approval	
by	(voting group)		
	(voting group)		
action was not required.	•	ors without shareholder action and shareholder	
action was not required.	dopted by the meorporators w	iniout shareholder action and shareholder	
8/1/16			
Dated	-2/		
· · · · · · · · · · · · · · · · · · ·	Those ()	<u>`</u>	
Signature (By a	director, president or other of	fficer – if directors or officers have not been	
		the hands of a receiver, trustee, or other court	
арро	inted fiduciary by that fiduciar	ry)	
	ZHANG CHONGAI		
	(Typed or printe	ed name of person signing)	
	PSTD		
	(Titl	le of person signing)	