# P11000063

(Re	questor's Name)	
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PICK-UP	WAIT	MAIL
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Certified Copies	_ Certificate	s of Status
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SECRETARY OF STAIL OF CORFORATIONS

C.L. 27-15

### **COVER LETTER**

Division of Corporations DOUBLE PHOENIX, 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: W. P. Mc LANE

Name of Contact Person Florida MASSAGE BROKER

Firm Company

7027 W. BROWARD Blvd, BOX 308

Address address: (to be used for future annual report notification) For further information concerning this matter, please call: WOUDY MCLANE at (954), 806-6211

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

#### **Mailing Address**

TO: Amendment Section

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

is enclosed)

## Articles of Amendment

Articles of Incorporation of



DOUBLE PHOENIX, INC. 15 MAR 25 AM 1:38
(Name of Corporation as currently filed with the Florida Dept. of State)
P 11000060063
(Document Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
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."  B. Enter new principal office address, if applicable:    1022 NE YS M S+.
B. Enter new principal office address, if applicable:  (Principal office address MUST BE A STREET ADDRESS)
OAKLAND PARK, FL 33334
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  713 HUCKLEBERRY LANE
W.PAlm BEACH, FL 33408
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:
Name of New Registered Agent HUIZHANG
713 Huckleberry LANE
New Registered Office Address: W. PAIN BEACH. Florida 33408
(City) (Zip Code)
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 <math>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	<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>	<u>Name</u>	<u>Addres</u> s
1) Change	P	YATING ZhAO	197 S. FEDERAL AWY.
Add Remove			197 S. FEDERAL HWY. Svite 100 BOCA RATM, FL 33432
2) Change	_P	Hui ZhanG	
Add Remove			W. Palm BEACH, FL 33408
3) Change			
Add Remove			
4) Change			
Add			
Remove			
5) Change			
Remove			
6) Change			
Add			
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	ing additional Articets, if necessary).	(Be specific)			
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	rovides for an excl	nange, reclassifica	ition, or cancellat	ion of issued share	·S.
f an amendment p	lementing the ame	ndment if not cor	tained in the amo	endment itself:	<del></del>
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The date of each amendment(s) adoption:	MARCH	10,2015	, if other than the
date this document was signed.		/ -	
	MARCH	112 2015	
Effective date if applicable:	nore than 90 days after amend	10 =015	<u>—</u>
(no n	nore than 90 days after amend	ment file dale)	
•			
Adoption of Amendment(s) (CHECK O	<u>ONE</u> )		
The amendment(s) was/were adopted by the shareholders was/were sufficient for approva		ast for the amendment(s)	
The amendment(s) was/were approved by the sharel must be separately provided for each voting group			
"The number of votes cast for the amendment	• •	roval	
by(voting gro		<del>*</del> ^*	
(voting gro	nup)		
The amendment(s) was/were adopted by the board of action was not required.	of directors without shareholde	r action and shareholder	
The amendment(s) was/were adopted by the incorporaction was not required.	orators without shareholder act	ion and shareholder	15
Dated	10, 2015		HAR 25
Signature Lui C	Zhan v		Sich of Corp.
(By a director, president of	r other officer – if directors or or – if in the hands of a receive		Forkling 4 7:38
	HUI ZHAI	16	<u>-</u> -
	Typed or printed name of pers	on signing)	
	PRESIDENT		
	(Title of person signing	ζ)	