## P11000079353

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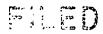
## COVER LETTER

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	RATION: Living Room Con	nmunity Acucpuncture Corp	<u> </u>
DOCUMENT NUM	P11000079353 BER:		
	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	atter to the following:	
	Rafael Perez		
		Name of Contact Person	1
		Firm/ Company	
	28 West Flagler Street, Suite	500	
		Address	
	Miami, FL 33130		
		City/ State and Zip Cod	e
	rafael@rafaelperez.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further information	n concerning this matter, plea-	se call:	
Rafael Perez		at ( 305	547-8448 de & Daytime Telephone Number
Name of Contact Person		Area Co	de & Daytime Telephone Number
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment of State:
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Am Div P.O	iling Address endment Section ision of Corporations . Box 6327 addresses, FL 32314	Amend Divisio The C	Address Iment Section In of Corporations entre of Tallahassee V. Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation



Living Room Acupuncture Corp			2021 HH. 20 PM 12: 1.1
(Name of Co	rporation as currently	filed with the Florida Dep	ic of State)
11000079353			SECREMAR OF STATE
	(Document Number of C	Corporation (if known)	IMELAHASSEE, FL
Pursuant to the provisions of section 607.1006, its Articles of Incorporation:	, Florida Statutes, this Fl	orida Profit Corporation a	dopts the following amendment(s) to
A. If amending name, enter the new name of	of the corporation:		
Downtown Miami Acupuncture Center Inc.			The new
name must be distinguishable and contain the w "Inc.," or Co.," or the designation "Corp," "chartered," "professional association," or the	" "Inc," or "Co". A	mpany," or "incorporated professional corporation	or the abbreviation "Corp.," name must contain the word
B. Enter new principal office address, if ap (Principal office address MUST BE A STREE		N/A	
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF)  D. If amending the registered agent and/or	ICE BOX) registered office addre	N/A ss in Florida, enter the na	me of the
new registered agent and/or the new reg	istered office address:		
Name of New Registered Agent N/A	<u> </u>	·	
	(Florida stree	t address)	<u> </u>
N/A	<b>\</b>		_, Florida
New Registered Office Address:	((	City)	(Zip Code)
New Registered Agent's Signature, if chang I hereby accept the appointment as registered	ging Registered Agent: agent. I am familiar wi	th and accept the obligatio	ns of the position.
<u>-</u>	Signature of New Reg	istered Agent, if changing	

Check if applicable

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.

X Change	PT	John Do	<u>e</u>	
X Remove	$\underline{Y}$	<u>Mike Jo</u>	<u>nos</u>	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) Change		<u>-</u> -	N/A	<del></del>
Add				
Remove				
2) Change		_		
Add				
Remove Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				<u> </u>
6) Change				
Add				
Remove				

A	or adding additional a ional sheets, if necessar	y). (Be specific)			
					<del>-</del>
<del></del>	<del></del>			<del></del>	
<del></del>		<del></del>	·		
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			_ <del>_</del>	-	
		<del></del>			
	-	_			
_					
If an amend	ment provides for an e	exchange, reclassifica	ition, or cancellat	ion of issued share	5,
provisions	for implementing the s	amendment if not cor	ntained in the am	endment itself:	_
(if not c	applicable, indicate N/A	)			
(9 //// נ					
		<u> </u>	·		··- <u></u> -
A					

· ·

	July 26, 2021	
The date of each amendment(s) a date this document was signed.	doption:, if c	other than th
_	y 26, 2021	
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
<b>Note:</b> If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing requirements, this date will not be epartment of State's records.	e listed as th
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were adaction was not required.	opted by the incorporators, or board of directors without shareholder action and shareh	older
☐ The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.	
	proved by the shareholders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s):	
"The number of votes cas	for the amendment(s) was/were sufficient for approval	
by	· · · · · · · · · · · · · · · · · · ·	
	(voting group)	
July 26, 20	)21	
Dated		
	12/1.151)	
Signature	Take Pry	
	lirector, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court	
	ited fiduciary by that fiduciary)	
	Rafael Perez	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	