## P11000097134

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(Address)
(Address)
(City/State/Zip/Phone #)
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(Business Entity Name)
(Document Number)
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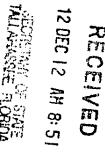
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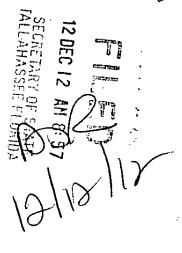


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**COVER LETTER** 

TO: Amendment Section Division of Corporations
NAME OF CORPORATION: SPRAY TAN LA LINC
DOCUMENT NUMBER:
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Michael Herrer
SORAY TAN LA INC.
7857 W. Sample Rd. #133+139
ORAI SORINOS FL 33065
MANA MENTO S DRAY TAN LAWHOLESAC. CON
•
For further information concerning this matter, please call:  Michael Herrer at 56/305-5/47  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
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, PL 32314  Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle

Articles of Amendment to Articles of Incorporation The state of the s

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SECRETARY OF STATE

			HELAHASSER E	L ກວາກັ <sub>ຈ</sub>
Name of Corporation as currently	filed with the Flo	rida Dept. of State)		= VIUI) Ĥ
DOROY TAN W	9 I/	1/6.		
(Document Number of	of Corporation (if	known)		-
/ rsuant to the provisions of section 607.1006, Flori Articles of Incorporation:	da Statutes, this F	lorida Profit Corporal	ion adopts the followin	g amendment(s)
If amending name, enter the new name of the	corporation:			
				The new
me must be distinguishable and contain the wo forp.," "Inc.," or Co.," or the designation "Cor, and "chartered," "professional association," or the	p," "Inc," or "C	o". A professional co		bbreviation
Enter new principal office address, if applicab rincipal office address <u>MUST BE A STREET AD</u>	le: O <u>DRESS</u> )			- •
Enter new mailing address, if applicable:				-
(Mailing address MAY BE A POST OFFICE B	<u>ox</u> )			-
				_
			_	_
If amending the registered agent and/or regist new registered agent and/or the new registere	ered office addre d office address:	ss in Florida, enter ti	te name of the	
Name of New Registered Agent				
	(Florida stree	et address)		
New Registered Office Address:		P	lorida	_
	(City)		(Zip Code)	
w Registered Agent's Signature, if changing Reservey accept the appointment as registered agent.	<mark>egistered Agent:</mark> . I am familiar wa	ith and accept the obli	gations of the position.	
Signature of	New Registered At	gent, if changing	•	

0801

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:	e, ana qui	y Smith, NY US UN NUU.	
X Change	PT	John Doe	
X Romove	¥	Mike Jones	
X Add	<u>\$V</u>	Sally Smith	
Type of Action (Check One)  1) Change	Title Co)	dent Michael Herre	Address 197857W.Sampleld. +6-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1
Add	P	Robert Longran	216 MAINLAIR
2) Change	<del></del>	1 toxes to toxes	WARWICK, RI UZE86
Remove			
3) Change		-	
Add			27
Remove			
4) Change	<del> </del>		
Add			
Remove			
5) Change	<del></del>		
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6) Change			·
Add			
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<u>provisions for</u>	<u>r implementin</u>	g the amen	nge, reclass dment if no	ification, or c t contained in	ancellation the amendr	f issued share tent itself:	<b>3</b> 5
<u>provisions for</u>	<u>r implementin</u>	g the amen	nge, réclass dment if no	ification, or c t contained in	ancellation the amendi	f issued share lent itself:	3.
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<u>provisions for</u>	<u>r implementin</u>	g the amen	nge, reclass	ification, or c t contained in	ancellation the amendr	f issued share tent itself:	5.
provisions for	<u>r implementin</u>	g the amen	dment if no	ification, or c	ancellation the amendr	if issued share tent itself:	3.
provisions for	<u>r implementin</u>	g the amen	dment if no	ification, or c	ancellation the amendr	f issued share tent itself:	3.

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	12/	10/12	
The date of each amendment(s)	doption:	1011 6	
Effective date if applicable:	12/10	12	
	(no moi	re tha <b>n 90</b> d <b>ay</b> s aft	er amendment file date)
Adoption of Amendment(s)	( <u>CHECK ON</u>	(E)	
The amendment(s) was/were adby the shareholders was/were sa	opted by the sharehold ufficient for approval.	lors. The number of	of votes cast for the amendment(s)
☐ The amendment(s) was/were approvided for must be separately provided for			
"The number of votes cast	for the amendment(s)	was/were sufficie	nt for approval
by			
	(voting group	) )	
The amendment(s) was/were adaction was not required.  The amendment(s) was/were adaction was not required.			
Dated	2/19/1	3	1
Signatury		//	
	lirector president or o	ther officer - if du	ectors or officers have not been
			a receiver, trustee, or other court
арроіг	nted fiduciary by that f	ae/	HERRERA
	(Typed or	printed name of p	erson signing)
	· TR	es 10	leat
	(Title	of person signing)	-