## P12000004741

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	<del>e #)</del>
PICK-UP	☐ WAIT	MAIL MAIL
(Bu	isiness Entity Nan	ne)
(Document Number)		
Certified Copies	fied Copies Certificates of Status	
Special Instructions to Filing Officer:		

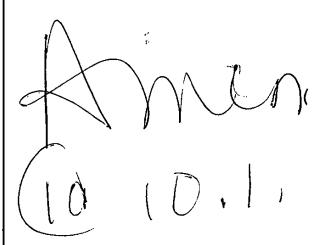




500263472735

09/23/14--01019--007 \*\*35

1L SEP 23



## **COVER LETTER**

TO: Amendment Section Division of Corpo			
NAME OF CORPOR	ATION: DAO MASS	SAGE INC.	
DOCUMENT NUMB	<sub>ER:</sub> P1200004741	9	
	of Amendment and fee are su		
Please return all corres	pondence concerning this ma	tter to the following:	
	GLORIA GUO CI	PA	
•		Name of Contact Persor	1
	GLORIA GUO &	ASSOCIATES C	CPA PA
-		Firm/ Company	
	9200 BELVEDEF	, ,	103
-	<u> </u>	Address	
	WEST PALM BE	ACH, FL 33411	
-	· · · · · · · · · · · · · · · · · · ·	City/ State and Zip Code	e
GL	ORIAGUOCPA@	GMAIL.COM	
<del></del>	E-mail address: (to be us	sed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
GLORIA GUO	O CPA	at (561	383-8388
Name o	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable 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)	Certificate of Status Certified Copy (Additional Copy is enclosed)
	ling Address		Address
Ame	endment Section	Ameno	micht Section

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

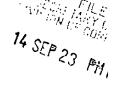
Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

## Articles of Amendment to Articles of Incorporation of



## DAO MASSAGE INC

(Name of Corporation as currently filed with the Florida Dept. of State)
P1200047419

(Document Number of Corporation (if known)

Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendments.

ts Articles of Incorporation:	1000, 1 lottuu Bullutes, tiils 1 lottuu 1 rojii	corporation adopts the following attended
A. If amending name, enter the new na	me of the corporation:	
		The nev
	ation "Corp," "Inc," or "Co". A profes	," or "incorporated" or the abbreviation ssional corporation name must contain the
3. Enter new principal office address, Principal office address MUST BE A ST		
C. Enter new mailing address, if appli (Mailing address MAY BE A POST of		
	<del></del>	
D. If amending the registered agent an new registered agent and/or the new	d/or registered office address in Florida v registered office address;	, enter the name of the
Name of New Registered Agent	SU MEI LIU	
	5800 N UNIVERSITY DE	R STE A
	(Florida street address)	
New Registered Office Address:	TAMARAC	, Florida_33321
	(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
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 = Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each 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. The 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 Che 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>	Name	Address
1) Change	Р	JING HAN	5800 N UNIVERSITY DR S
Add			TAMARAC, FL 33321
Remove			
2) Change	P	YAN LI	5800 N UNIVERSITY DR S
Add			TAMARAC, FL 33321
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			
LINGHOVE			

Atı	If amending or adding additional Articles, enter change(s) here: Attach additional sheets, if necessary). (Be specific)	
•		
_		
_		
	<del></del>	
<u>If s</u>	If an amendment provides for an exchange, reclassification, or can provisions for implementing the amendment if not contained in the (if not applicable, indicate N/A)	ncellation of issued shares, the amendment itself:
		<del></del>

The date of each amendment	t(s) adoption: 09/18/2014	, if other (
date this document was signed	1.	
Effective date if applicable:	10/1/2014	
Enterve date <u>ii appileable</u> .	(no more than 90 days after amendment file date)	<del></del>
Adoption of Amendment(s)	(CHECK ONE)	
	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.	
	re approved by the shareholders through voting groups. The following statement ed for each voting group entitled to vote separately on the amendment(s):	
	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.	ere adopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/we action was not required.	ere adopted by the incorporators without shareholder action and shareholder	
Dated_9/18	B/2014	
Signature _	HAN JING	
S	By a director, president or other officer – if directors or officers have not been elected, by an incorporator – if in the hands of a receiver, trustee, or other court ppointed fiduciary by that fiduciary)	
	JING HAN	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	