## P13000015991

(Re	equestor's Name)	
(Ac	idress)	<u>-</u>
(Ac	ddress)	
(Ci	ty/State/Zip/Phone #	)
PICK-UP	☐ WAIT	MAIL
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## **COVER LETTER**

Division of Corporations NAME OF CORPORATION: AMAZING DREAM SPA, INC. DOCUMENT NUMBER: P13000015991 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: SHIYING PENG
Name of Contact Person Firm/Company
6600 CYPRESS RD, #101 PLANTATION, FC 33317

City/State and Zip Code LIFE 33317 (3) VAHOO. (OM) E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: SHIVING PENG at (954) 822-0862Name 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 is enclosed) Street Address **Mailing Address** 

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

TO: Amendment Section

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## **Articles of Amendment**

. Articles of Incorpor	ration	
- AMAZING DREAM SPA	INC.	
(Name of Corporation as currently filed with the Florida	Dept. of State)	
P13000015991		
(Document Number of Corporation (if know	vn)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida</i> its Articles of Incorporation:	la Profit Corporation adopts the f	following amendment(s) to
A. If amending name, enter the new name of the corporation:		
		The new
name must be distinguishable and contain the word "corporation," "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co", word "chartered," "professional association," or the abbreviation "P.A."	company," or "incorporated" or A professional corporation name	r the abbreviation
B. Enter new principal office address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
<del></del>		<del></del>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
<del></del>		<del></del>
<del></del>		
D. If amending the registered agent and/or registered office address in new registered agent and/or the new registered office address:	Florida, enter the name of the	
Name of New Registered Agent		<u>ယ</u> ်နှ
(Florida street ada	dress)	二二元
New Registered Office Address:	. Florida	<b>元</b> 2.0
(City)	(Zip Ci	ode) ep
		<u>a</u>
No. Designation 1.4. (1.6)		
New Registered Agent's Signature, if changing Registered Agent:  I hereby accept the appointment as registered agent. I am familiar with an	nd accept the obligations of the po	sition.
÷		
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 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:	ive, and sally sn	nin, Sv as an Aaa.	
X Change	PT Joh	nn Doe	
X Remove	<u>V</u> <u>Mil</u>	ke Jones	
X Add	<u>SV</u> <u>Sal</u>	ly Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	V	SHIFEN PENG	6600 CYPRESS RIS
Add			APP 101
Remove			PLANTATION, FL 3331,
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change	<del></del>		
Add			
Remove			

f amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
<del></del> -	
	***************************************
<del></del>	
an amendment provides for an exch	hange, reclassification, or cancellation of issued shares,
orovisions for implementing the amer (if not applicable, indicate N/A)	endment if not contained in the amendment itself:
(y not applicame, maicale WA)	

The date of each amendment(s) ad	option: MARCH 1, 2013
Effective date <u>if applicable</u> :	MARCH 1, 2013
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
☐ The amendment(s) was/were adop by the shareholders was/were suf	pted by the shareholders. The number of votes cast for the amendment(s) Tricient for approval.
	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):
"The number of votes cast f	for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
The amendment(s) was/were adopaction was not required.	pted by the board of directors without shareholder action and shareholder pted by the incorporators without shareholder action and shareholder 24 4 2013
(By a di selected	rector, president or other officer – if directors or officers have not been l, by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)
_	SHIYING PENG (Typed or printed name of person signing)
	(Typed or printed name of person signing)
_	PRESIDENT
	(Title of person signing)