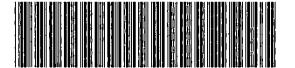
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(Re	equestor's Name)	
(Ad	ldress)	
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PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

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13 AUG 28 PH 1: 45 SECRETARY OF STATE

C. LEWIS SEP 5 2013 EXAMINER

COVER LETTER

TO: Amendment Section

Division of Corporations				
NAME OF CORPORATION: Hassage Gina Spa Corp. DOCUMENT NUMBER: P130 000 63 487				
The enclosed Articles of Amendment and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
Name of Contact Person Hassage Gina Spa Corp. Firm/ Company 12678 SW 8 Street Address Miami, Fl. 33184 City/ State and Zip Code jorgeluis 0203 @ Yahoo. es E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
Sorge L. Simon at (786), 366 - 6695 Name of Contact Person Area Code & Daytime Telephone Number				
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 Certificate of Status Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed)				
Mailing Address Amendment Section Street Address Amendment Section				

Division of Corporations

P.O. Box 6327 Tallahassee, FL 32314 Division of Corporations Clifton Building 2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

FILED

use Gina Spa Obro

13 AUG 28 PM 1: 45

SECTO TAKE OF STATE TAELAHASSEE, FLORIBA P130 000 63 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: 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: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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 (Florida street address) New Registered Office Address: Florida 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:

 $P = President; \ V = Vice \ President; \ T = Treasurer; \ S = Secretary; \ D = Director; \ TR = Trustee; \ C = Chairman or Clerk; \ CEO = Chief Executive Officer; \ CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.$

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 Do	<u>oe</u>	1	
X Remove	<u>V</u>	Mike Jo	<u>ones</u>	Na	
X Add	<u>sv</u>	Sally Sn	<u>mith</u>		
Type of Action (Check One)	<u>Title</u>		Name		<u>Addres</u> s
1) Change		_			
Add					
Remove					
2) Change		_			
Add					
Remove					
3) Change		_			
Add					
Remove					
4) Change					
Add					
Remove					
5) Change					
5) Change					
Add Remove					
Kemove					
6) Change					
Add					
Remove					

. <u>If amending or addir</u>	ng additional Arti	cles, enter change	(s) here:		
(Attach additional she	ets, if necessary).	(Be specific)			
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	Dia				
					
					
					
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If an amendment pro	nvides for an exch	ange reclassificat	tion or cancellatio	n of issued shares	
provisions for imple	ementing the ame	ndment if not con	tained in the amen	dment itself:	
(if not applicable	e, indicate N/A)				
	ماء				
	<u> </u>	·			
					

	-	E Cother than the
The date of each amendment(s) adoption:		Des van Hotner than the
, ,	13 AHG 2	28 PM 1:45
Effective date if applicable: 08 21 13		-0 111 1:43
Effective date if applicable: (no more than 90 days after amendment file)	le dateSEGRETA TACLAHAS	RY UF STAPE ISEE, FLORIDA
Adoption of Amendment(s) (CHECK ONE)		
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for t by the shareholders was/were sufficient for approval.	the amendment(s)	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The formust be separately provided for each voting group entitled to vote separately on the ame		t
"The number of votes cast for the amendment(s) was/were sufficient for approval		
by"		
by" (voting group)		
☐ The amendment(s) was/were adopted by the board of directors without shareholder action action was not required. ☐ The amendment(s) was/were adopted by the incorporators without shareholder action and action was not required.		
Dated		
(By a director, president or other officer – if directors or officer selected, by an incorporator – if in the hands of a receiver, trust appointed fiduciary by that fiduciary)		
Jorge L. Simon (Typed or printed name of person sign	•	
(Typed or printed name of person sign	ning)	
President	•	
(Title of person signing)		