P1400000 4328

(Requ	iestor's Name)	
(Addir	ess)	
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(City/S	State/Zip/Phone	e #)
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5		

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2019 KAY 31 FD 1:31

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: SALON DE BODY	WRAPPING APPLE SPA	VINC
DOCUMENT NUMB			
	of Amendment and fee are sul	bmitted for filing.	
Please return all corres	pondence concerning this mat	ter to the following:	
:	II. KEVIN KIM		
-		Name of Contact Persor	1
	H K ACCOUNTING		
-		Firm/ Company	
	4987 N UNIVERSITY DR S	TE 13B	
-		Address	
	LAUDERHILL, FL 33351		
-		City/ State and Zip Code	· · · · · · · · · · · · · · · · · · ·
HKG	ROUP1214@GMAIL.COM		
		sed for future annual report	notification)
For further information H. KEVIN KIM	concerning this matter, pleas		336-0178
Name c	of Contact Person	Area Co) 336-0178 de & Daytime Telephone Number
	r the following amount made		
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ame Divi P.O.	ling Address endment Section sion of Corporations Box 6327 altassee, FL 32314	Ameno Divisio Cliftor 2661 F	Address Iment Section on of Corporations Building Executive Center Circle massee, FL 32301

Articles of Amendment

Articles of Incorporation of

SALON DE BODY WRAPPING APPLE			
(Name c	of Corporation as currently	filed with the Florida I	Dept. of State) [: 3]
P14000004328		797	T NAI JI I I I I I
Pursuant to the provisions of section 607.		Corporation (if known) Local Corporation Corporation Corporation	Shinking a start walled
its Articles of Incorporation:			+
A. If amending name, enter the new na	ime of the corporation:		The new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	iation "Corp." "Inc." or "C	'o". A professional cor	orporated" or the abbreviation
B. Enter new principal office address, (Principal office address <u>MUST BE A S</u>	<u>if applicable:</u> TREET ADDRESS)	·	
			
C. Enter new mailing address, if appl (Mailing address MAY BE A POST			
		-	
D. If amending the registered agent at	id/or registered office addr	ess in Florida, enter the	name of the
new registered agent and/or the ne	w registered office address:		
Name of New Registered Agent	H. KEVIN KIM		
	4987 N UNIVERSITY DR	STE 13B	
	(Florida stre	et address)	
	LAUDERHILL	,	
New Registered Office Address:		·Citri	, Florida(Zip Code)
	,	Cin	(ng) Chic)
New Registered Agent's Signature, if a I hereby accept the appointment as regis	thanging Registered Agent: tered agent. I am familiar w	ith and accept the oblig	ations of the position.
	/ /	. /	
-	My M	ahi	
	Sigfature of New R	egistered Agent, if chang	ung

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.

Xample: X Change	<u>PT</u> <u>John</u>	ı Doe	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
X Add	<u>SV</u> <u>Sall</u>	y Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Address</u>
1) Change	P	JOHNNY S KIM	5154 N FEDERAL HWY
Add			FT LAUDERDALE, FL 33308
X Remove			
2) Change	PT	HYUN JA KIM	5154 N FEDERAL HWY
X Add		· · · · · · · · · · · · · · · · · · ·	FT LAUDERDALE, FL 33308
Remove			
3 1 Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

,	t <u>icles, enter change(s) here</u> : (Be specific)
	
If an amondment provides for an ave	change, reclassification, or cancellation of issued shares,
provisions for implementing the am	nendment if not contained in the amendment itself:
(if not applicable, indicate N/A)	

06/01/2019	20 3 3 3 1
The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
06/01/2019	
Effective date if applicable:	
(no more than 90 days after amendment tile da	110)
Note: If the date inserted in this block does not meet the applicable statutory filing requirem document's effective date on the Department of State's records.	ents, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes east for the c by the shareholders was were sufficient for approval.	mendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following the separately provided for each voting group entitled to vote separately on the amendation of the separately of the amendation of the separately of th	wing statement nent(s):
"The number of votes east for the amendment(s) was/were sufficient for approval	
by (voting group)	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action an action was not required.	d shareholder
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shaction was not required.	archolder
05/29/2019 Dated	
Signature Xiang J.	ive not been
appointed fiduciary by that fiduciary)	· · · · · · · · · · · · · · · · · · ·
JOHNNY S KIM	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	