

Division of Corporations Electronic Filing Cover Sheet

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And

To:

Division of Corporations

Fax Number

: (850)617-6380

R. WHITE

**100 28 2017** 

From:

Account Name

: KIM MARKS CPA

Account Number

: 120120000072

Phone

: (305)895-5815

Fax Number

: (305)895-6273

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address:

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COR AMND/RESTATE/CORRECT OR O/D RESIGN HOT BODY AUTO SPA, INC.

Certificate of Status	
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FLORIDA DEPARTMENT OF STATE Division of Corporations

November 27, 2017

EOT BODY AUTO SPA, INC. 5141 NW 79TH AVE UNIT 3-C DORAL, FL 33166

SUBJECT: HOT BODY AUTO SPA, INC.

REF: P14000093036

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Page 4 is missing. Please include page 4 and resubmit.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Rebekah White Regulatory Specialist II FAX Aud. #: H17000305706 Letter Number: 017A00023788

O BOX 6327 - Taliahassee, Florida 32314

3058956273 M 7 0003057063 COVERLETTER

<u>COVER LETTER</u>		
TO: Amendment Section Division of Corporations		
NAME OF CORPORATION: HOT BODY AUTO SPA, INC.		
DOCUMENT NUMBER: P14000093036		
The enclosed Articles of Amendment and fee are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
JOSEPH GUARINO		
Name of Contact Person		
HOT BODY AUTO SPA, INC.		
Firm/ Company		
5141 NW 79TH AVE UNIT 3-C		
Address		
D <b>or</b> al, FL 33166		
City/ State and Zip Code		
ipeg718305@amail.com		
E-mail address: (to be used for future annual report potification)		
For further information concerning this matter, please call:		
Stephen Korn at ( 305 ) 895-5815		
Name of Contact Person Area Code & Daytime Telephone Number	_	
Employed for about Fresh Cally in a second of the call and the call an		
Enclosed is a check for the following amount made payable to the Florida Department of State:		
S35 Filing Fee Certificate of Status Certificate of Status (Additional copy is enclosed)  CERTIFICATE OF STATUS (Additional Copy is enclosed)  CERTIFICATE OF STATUS (Additional Copy is enclosed)		
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314  Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		

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Articles of Amendment to

SEGRETARY DE LIME TALLAHASSEF FLURIDA

	Articles of Incorporation of
	HOT BODY AUTO SPA, INC.
(Name of Co	poration as currently filed with the Florida Dept. of State)
P1400	0 <u>00</u> 93036
<del></del>	(Document Number of Corporation (if known)
Pursuant to the provisions of section 607,1006, its Articles of Incorporation:	Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of	the corporation:
	The new
name must be distinguishable and contain to "Corp.," "Inc.," or Co.," or the designation word "chartered," "professional association,"	the word "corporation," "company," or "incorporated" or the abbreviation  "Corp " "Inc " or "Co" A professional corporation name must contain the
B. Enter new principal office address, if app	olicable:
(Principal office address MUST BE A STREE	(TADDRESS)
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF)	
new registered agent and/or the new reg	registered office address in Florida, enter the name of the istered office address:
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	. Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changi	ng Registered Agent:
i hereby accept the appointment as registered in	agen. 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 Sali	ly Smith, S	Vas an Add.		·
Example: X Change	<u>PT</u>	John Doe	<u>e</u>		
X Remove	<u>v</u>	Mike Jor	nea		
X Add	<u>sv</u>	Sally Sm	<u>iith</u>		
Type of Action (Check One)	<u>Title</u>		Name		Address
1) Change	MGR	/Rep	Miriam Saura	<del></del>	Miriam Saura
Add					5141 NW 79TH AVE UNIT 3-C
X Remove					Doral, FL 33166
2) Change		_			
Add					
Remove					
3 ) Change		<del></del>		<del></del> -	
Add					
Remove					
4) Change		_		<del></del>	
Add					
Remove					
5) Change		_			
Add					
Remove					
6) Change		_			
Add					
Remove					

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E. If amending or adding additional Artic	clessienter change(s) here:
E. If amending or adding additional Artic (Attach additional sheets, if necessary).	(Be specific)
	, a
	H
	<u>                                     </u>
<del></del>	
F. If an amendment provides for an exch	anger reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
provisions for implementing the amer	ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
	<u>  [6]                                   </u>
	1

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M170003057063 The date of each amendment(s) adoption: if other than the date this document was signed. Effective date if applicable: (no more than 90 days after amendment file date) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. Adoption of Amendment(s) (CHECK ONE) The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval. ☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s): "The number of votes cast for the amendment(s) was/were sufficient for approval (volling group) The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required. The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required. 1017 Dated Signature (By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary) JOSEP#IGUARINO (Typed or printed name of person signing) President (Title of person signing)