## P15000065854

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PICK-UP	☐ WAIT	MAIL		
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Certified Copies	Certificates	of Status		
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SECRETARY OF STATE

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	RATION: XIAOLIN TARRIS	S. P.A.	<u>-</u>			
DOCUMENT NUM	P15000065854					
The enclosed Articles	of Amendment and fee are su	bmitted for filing.				
Please return all corre	spondence concerning this ma	tter to the following:				
	YANG, EVELYN					
		Name of Contact Persor	1			
	EVELYN YANG P.A.					
		Firm/ Company				
	370 GOLFVIEW RD					
		Address	<del></del>			
	NORTH PALM BEACH, FL	33408 US				
		City/ State and Zip Code				
	lintarris66@gmail.com					
	E-mail address: (to be us	ed for future annual report	notification)			
For further informatio	n concerning this matter, pleas	se call: at ( <u>561</u>	972-3158			
	of Contact Person	at ( Area Co	de & Daytime Telephone Number			
	or the following amount made					
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			
Am Div P.O	iling Address endment Section ision of Corporations . Box 6327 lahassee, FL 32314	Amend Divisio The Co 2415 N	Address ment Section n of Corporations entre of Tallahassee N. Monroe Street, Suite 810 ussee, FL 32303			

## Articles of Amendment to Articles of Incorporation of



XIAOLIN TARRIS PA

XIAOLIN TARRIS, P.A.				* 	O
(Name o	of Corporation as currently	filed with the Florida Dept. of State)	- 03 - 13		
P15000065854				55	
	(Document Number of	Corporation (if known)			
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, this F	Iorida Profit Corporation adopts the following	lowing an	nendm	ent(s) to
A. If amending name, enter the new n	ame of the corporation:				
EVELYN YANG P.A.			Th	ie nev	at.
name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association,"	lorp," "Inc," or "Co". A	ompany," or "incorporated" or the abbre professional corporation name must c	viation" ontain th	Corp., 1e-wort	 d
B. Enter new principal office address, (Principal office address MUST BE A S					
C. Enter new mailing address, if appl (Mailing address MAY BE A POST					
D. If amending the registered agent ar	id/or registered office addre	ess in Florida, enter the name of the			
new registered agent and/or the new	v registered office address:				
Name of New Registered Agent	YANG, EVELYN		<del></del>		
	370 GOLFVIEW RD UNIT	702			
	(Florida stre	et address)			
New Registered Office Address:	NORTH PALM BEACH	Florida 33-	408		
Men Registered Office Fluid ess.		City)	(Zip Code	")	
New Registered Agent's Signature, if c I hereby accept the appointment as regist	ered agent. I am familiar w	ith and accept the obligations of the posi.	tion.		
	Signature of New Re	gistered Agent, if changing	<u></u>		

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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)

Example:

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 = ChiefExecutive 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.

X Change	<u>PT</u>	<u>John Doe</u>	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change			
Add			
Remove			
2) Change			
Add			
Remove 3 ) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	eets, if necessary).	(Be specific)			
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	04/02/2022 adoption:		if other than the
date this document was signed.	02/2022		
Effective date <u>if applicable</u> :			
<u></u>	(no more tha	an 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the L	block does not meet the appeartment of State's record	pplicable statutory filing requirements, this date v ds.	vill not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )		
☐ The amendment(s) was/were action was not required.	dopted by the incorporators,	, or board of directors without shareholder action a	ind shareholder
■ The amendment(s) was/were ac by the shareholders was/were s		The number of votes cast for the amendment(s)	
☐ The amendment(s) was/were ap must be separately provided fo	proved by the shareholders reach voting group entitled	s through voting groups. The following statement d to vote separately on the amendment(s):	
		s/were sufficient for approval	
bv	(voting group)	···	
,	(voting group)		
04/02/202	7		
Dated			
Signature			
select		officer – if directors or officers have not been in the hands of a receiver, trustee, or other court iary)	
	YANG, EVELYN	Inelynyung ned name of person-signing)	
	(Typed or prin	nted name of person signing)	
	PRESIDENT		
	(Title of person	on signing)	