P15000067874

(Re	equestor's Name)		
, (Ac	ldress)		
(Ac	ldress)		
(Cit	ty/State/Zip/Phone	; #)	
PICK-UP	☐ WAIT	MAIL	
(Bu	isiness Entity Nam	ne)	
(Document Number)			
Certified Copies	_ Certificates	of Status	
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C. CARROTHERS

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: ZIHAN ASIAN M	ASSAGE INC	
DOCUMENT NUM	BER: P15000067874		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	GLORIA GUO	*	
%	GLORIA GUO & ASSOCIA	Y Name of Contact Person	1
		Firm/ Company	· · · ·
	9200 BELVEDERE ROAD	SUITE 103	
		Address	
	WEST PALM BEACH, FL	33411	
	-	City/ State and Zip Cod	e
GLC	RIAGUOCPA@GMAIL.COI	М	
	-	sed for future annual report	notification)
For further information	on concerning this matter, pleas	561	383-8388
Name	of Contact Person	at (Area Co) de & Daytime Telephone Number
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment of State:
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section		Amend	Address iment Section
Division of Corporations		Division of Corporations Clifton Building	
P.O. Box 6327 Tallahassee, FL 32314		2661 Executive Center Circle	

Articles of Amendment to Articles of Incorporation

	of		
ZIHAN ASIAN MASSAGE INC			
(Name o	of Corporation as currently filed with th	e Florida Dept. of State)	
15000067874			
	(Document Number of Corporation (if known)	
ursuant to the provisions of section 607. s Articles of Incorporation:	1006, Florida Statutes, this Florida Profit	Corporation adopts the following amo	endment(s)
If amending name, enter the new na	me of the corporation:		
		The	new
ord "chartered," "professional associa Enter new principal office address, Principal office address MUST BE A S Enter new mailing address, if appli (Mailing address MAY BE A POST of	if applicable: TREET ADDRESS) cable: OFFICE BOX) d/or registered office address in Florida	E CORIE	2#15 0CT 23 PM 12: 12
Name of New Registered Agent	XIAODONG XU		
	2706 W ATLANTIC BLVD		
	(Florida street address)		
New Registered Office Address:	POMPANO BEACH	, Florida	
	(City)	(Zip Code)	

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.

XIOD DOY 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 <math>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 Doe	
X Remove	Y	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	P	XIAOPING XU	2706 W ATLANTIC BLVD
Add X Remove			POMPANO BEACH, FL 33069
2) Change	P	XIAODONG XU	2706 W ATLANTIC BLVD
X Add			POMPANO BEACH, FL 33069
Remove			
3) Change	-		
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	(Be specific)
_	·
1 11 11 11	
f an amendment provides for an exch provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
an amendment provides for an exchorovisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and and an analysis
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provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:

The date of each amendment date this document was signed		, if other than the
•	8/12/2015	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
	this block does not meet the applicable statutory filing requirements, this dat he Department of State's records.	e will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/weby the shareholders was/weby	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.)
	re approved by the shareholders through voting groups. The following statement ed for each voting group entitled to vote separately on the amendment(s):	nt
	s cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
☐ The amendment(s) was/we action was not required. ☐ The amendment(s) was/we	re adopted by the board of directors without shareholder action and shareholder re adopted by the incorporators without shareholder action and shareholder	г
action was not required.		
10/19 Dated	//2015	
Signature	Xiaopry Vu	
(F	By a director, president or other officer – if directors or officers have not been elected, by an incorporator – if in the hands of a receiver, trustee, or other court ppointed fiduciary by that fiduciary)	
•	XIAOPING XU	
	(Typed or printed name of person signing)	
	PRESIDENT	
•	(Title of person signing)	<u> </u>