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COVER LETTER

TO: Amendment Section

Division of Corporations THREE SUNYE SPA, INC NAME OF CORPORATION: **DOCUMENT NUMBER:** The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: WOODY MELANE

Florida MASSAGE BROKER E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee □\$43.75 Filing Fee & **□\$43.75** Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) **Mailing Address Street Address**

Amendment Section

Clifton Building

Division of Corporations

2661 Executive Center Circle Tallahassee, FL 32301

Amendment Section

Tallahassee, FL 32314

P.O. Box 6327

Division of Corporations

Articles of Amendment

Articles of Incorporation

	Articles of incorp	oration			
THREE		E	SPA.	INC	_
(Name of Corpora	tion as currently fi	led with th	ne Florida Dept	t. of State)	
P	150000	744	57		
(Doct	ument Number of Co	<i></i>			
Pursuant to the provisions of section 607.1006, Flori its Articles of Incorporation:	ida Statutes, this <i>Flo</i>	rida Profit	* Corporation ac	dopts the followin	g amendment(s) to
A. If amending name, enter the new name of the	corporation:				
					_The new
name must be distinguishable and contain the will "Corp.," "Inc.," or $Co.$," or the designation "Corword" chartered," "professional association," or the	rp," "Inc," or "Co'	' . A profe	y," or "incorpo essional corpord	orated" or the a	bbreviation contain the
B. Enter new principal office address, if applicab					
(Principal office address <u>MUST BE A STREET A'L</u>	ODRESS)				
	•	•		-	
	-				
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	POV)				SS
Mauing address MAT BE A FOST OFFICE B	<u> </u>				— P 35
	-				
	_				是 豐の
D. If amending the registered agent and/or regist	tarad office address	in Florida	antar the nan	na of tha	9: 26
new registered agent and/or the new registere		in Fivrius	i, enter the nan	ne or the	26
Name of New Registered Agent					
in the state of th					-
	(Florida street	address)			_
Non-Barrietanad Office Iddusus				Florida	
New Registered Office Address:	(Ci	(y)		, Florida <i>(Zip</i>	Code)
New Registered Agent's Signature, if changing Reliable thereby accept the appointment as registered agent.		and accer	of the obligation	s of the position	
				. graveyomina.	
					_
Sig	gnature of New Regi	stered Age	nt, 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 Doe	
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>	<u>Addres</u> s
1) Change		YANFANG YE	7400 N. FEDERAL HWY.
X Add			Ste A-8 BOCA RATON, 6L 33487
Remove			BOCA RATON, 6L 33487
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

. <u>If amending o</u> (Attach <i>additio</i>	r adding additional arm nal sheets, if necessary).	ticles, enter chang (Be specific)	e(s) here:		
		<u></u>			
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provisions fo	nent provides for an exc or implementing the am opticable, indicate N/A)				<u>'es,</u>
				,	
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	·				

The date of each amendment(s) adoption: SEPT 16, 2015	if other than the
Effective date if applicable: SEPT. 16, 2015	
(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 w document's effective date on the Department of State's records.	ill not be listed as the
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	
by"	
(voting 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.	
Dated SEPT. 16, 2015	
Signature X fearshing or	
(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)	_
JIANSHENG YANG	
(Typed or printed name of person signing)	
(RESIDENT	
(Title of person signing)	