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SECRETARY OF STATE
FALLAMASSEEF FLORINA

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION:	TOKYO NA	IL SPA INC			
DOCUMENT NUMBER:	P150000	74966	· · · · · · · · · · · · · · · · · · ·		
The enclosed Articles of Amena	<i>lment</i> and fee are su	bmitted for filing.			
Please return all correspondence	e concerning this ma	tter to the following:	·		
	CYN	THIA OUYANG			
· · · · · ·		Name of Contact Person	n		
	ZHANG & A	SSOCIATES CPA PA			
		Firm/ Company			
	1300 N	IE 191ST ST STE 311			
		Address			
	MI	AMI, FL 33179			
		City/ State and Zip Cod	e		
	CYNTHIA.OUY	ANG@YMAIL.COM			
E-m	ail address: (to be us	sed for future annual report	notification)		
For further information concerning this matter, please call:					
CYNTHIA OUYA	NG	at (919-7672		
Name of Contact	Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check for the follo	wing amount made	payable to the Florida Depa	urtment of State:		
	3.75 Filing Fee & retificate of Status	□\$43.75 Fiting Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Division Clifton 2661 E	Address Iment Section on of Corporations Building xecutive Center Circle assee, FL 32301		

Articles of Amendment to Articles of Incorporation of

TOKYO NAIL SPA INC

TORTO MAIL SI A	THE	
(Name of Corporation as currently	filed with the Florida Dept. of State)	
P15000074966		
(Document Number of C	Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this Fits Articles of Incorporation:	orida 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 the word "corporation, "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc," or "Coword "chartered," "professional association," or the abbreviation "P.	" "company," or "incorporated" or the abbreviation o". A professional corporation name must contain the	
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	SECRETARIAS SI	A STATE OF THE STA
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:	ss in Florida, enter the name of the	A STATE OF THE STA
Name of New Registered Agent		
····	····	
(Florida stree	(address)	
New Registered Office Address:	ity) , Florida(Zip Code)	
(C	usy Code)	
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with	th and accept the obligations of the position.	
Signature of New Reg	ristered 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 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)	_Title	Name	<u>Addres</u> s
1) Change	D	KOU, HONG	2253 SHOMA DRIVE
Add			ROYAL PALM BEACH,
X Remove			FL 33414
2) Change			
Add			
Remove			
3) Change			<u> </u>
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	ending or adding additional sheets	s, if necessary).	(Be specific)				
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fan s	mendment provi	ides for an exch	ange, reclassifi	cation, or cance	llation of issued	shares,	
provi	i <mark>sions for implem</mark> if not applicable,	ienting the amei indicate N/A)	adment it not co	ontained in the a	amendment itseli	<u>l:</u>	
	····						
						* 0.0	

	10/11/2017	
The date of each amendment(s) ac date this document was signed.	loption:	, if other than the
Effective date if applicable:	10/11/2017	
<u></u>	(no more than 90 days after amendment file date)	
Note: If the date inserted in this b document's effective date on the De	lock does not meet the applicable statutory filing requirements, this department of State's records.	late will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were add by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendment fficient for approval.	(s)
	roved by the shareholders through voting groups. The following statem each voting group entitled to vote separately on the amendment(s):	<i>ient</i>
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
The amendment(s) was/were ado action was not required.	pted by the board of directors without shareholder action and sharehold	ler
☐ The amendment(s) was/were ado action was not required.	pted by the incorporators without shareholder action and shareholder	
Dated	10/11/2017	
Signature		
(By a diselected	rector, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other couled fiduciary by that fiduciary)	
	LI J YANG	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	