P19000041096

(Re	questor's Name)	
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(City	y/State/Zip/Phone	0 #)
PICK-UP	WAIT	MAIL
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Certified Copies	Certificates	of Status
Special Instructions to 1	Tiling Officer	
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COVER LETTER

10 Amendment Section Physician of Corporations

	ATION: LUCKY HANDS			
DOCUMENT NUMB	ER: P19000041096			
	of Amendment and fee are su			
Mass, return all corres	pondence concerning this ma	tter to the following:		
	JUN LUO			
		Name of Contact Persor		
	LUCKY HANDS SPA, INC			
		Firm/ Company		
	2800 N FEDERAL HWY, SU	JITE 2		
		Address		
	BOCA RATON, FL 33431			
		City/ State and Zip Code		
	LUCKYUS1949@GMAIL.C	OM		
	E-mail address: (to be us	ed for future annual report	notification)	
For further information	reoncerning this matter, pleas	se call:		292
PNITO		at (⁵⁶¹	218-4208 de & Daytime Telephone Numbér	23.75 2.75
Name o	of Contact Person	Area Co	de & Daytime Telephone Number	ر _د . ا
Unclosed is a check for	r the following amount made	payable to the Florida Depa	artment of State:	r\cdot
wa 835 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)	(4) (4)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio The Co 2415 N	Address ment Section in of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303	

Articles of Amendment to Articles of Incorporation of

ı	1	1 'k	٧.	1.2	N.	N	CDA	INC

(Name c	of Corporation as currently	filed with the Florida Dept. of State)	•
	(Document Number of	Corporation (if known)	
Present to the provisions of section 607. 1. As reles of Incorporation:	1006, Florida Statutes, this F	Clorida Profit Corporation adopts the follown	ig amendment(s)
V 11 amending name, enter the new na	nue of the corporation:		
	"orp," "Inc," or "Co". A	ompany," or "incorporated" or the abbreviati professional corporation name must contac	
3 <u>Enter new principal office address</u> , Principal office address <u>MUST BE A S</u>			
Later new mailing address, if applied Mailing address MAY BE A POST of			2
). If amending the registered agent an new registered agent and/or the nev		ess in Florida, enter the name of the	3-7
	JUN LUO		2
Monte of the registry of the second	2800 N FEDERAL HWY, S	SUITE 2	
	(Florida stre	et address)	
New Registered Office Address;	BOCA RATON	. Florida	-
			Cods
Name of New Registered Agent New Registered Office Address: New Registered Agent's Signature, if energy accept the appointment as regist	JUN LUO 2800 N FEDERAL HWY, S (Florida stre BOCA RATON hanging Registered Agent: ered agent.	et address) 33.434 , Florida	2 57 2: 34
_ Tun	luo	gistered Agent, if changing	-

Check if applicable

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

It 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:

Was k additional sheets, if necessary)

Prove note the officer/director title by the first letter of the office title:

 $i = \text{vesident}; V \neq Vice President; T \neq \text{Treasurer}; S \neq \text{Secretary}; D + \text{Director}; TR + \text{Trustee}; C + \text{Chairman or Clerk}; CLO + \text{Chief } i = \text{vive Officer}; CFO \neq \text{Chief Financial Officer}. If an officer/director holds more than one title, list the first lener of <math>cackw(1, ch.)$, costoren, Treasurer, Director would be PTD.

Changer should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the influence of distinger. Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, Praisa Changer, Mike Jones V as Remove, and Sally Smith, SV as an Add.

Example: N ∈ bange <u> P.L.</u> John Doc A Remove <u>V</u> Mike Jones . 3. Add \underline{SV} Sally Smith Title 1 3 of Action Name <u>Addres</u>s Cass One) EDWIN ROER 2800 N FEDERAL HWY, SUITE 2 Change BOCA RATON, FL 33431 __ Add Remove JUN LUO 2800 N FEDERAL HWY, SUHLE. 2) ____ Change BOCA RATON, FL 33431 AddRemove _ __ Change ___ Add __ Remove . Change Add Remove Change Add Remove o 🛒 🚊 Change Add 🚊 🔔 Remove

ach additional sheets, if nece,	nal Articles, enter chan ssary). (Be specific)			
				
				
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amendment provides for :	an exchange, reclassific	ration or cancellation	of issued shares	
wisions for implementing th	he amendment if not co	ontained in the amend	Iment itself:	
(if not applicable, indicate i	N/A)			
				-
-=				
<u> </u>				
	<u>. </u>			

The date of each amendment	JUNE 20, 2022 I(s) adoption:	if other than the
Lite this document was signed		: If the title in
	JUNE 20, 2022	
offective date <u>if applicable</u> :	tno more than 90 days after amendment file date)	·-·
	this block does not meet the applicable statutory filing requirements, this di- he Department of State's records.	ite will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was were account was not required.	re adopted by the incorporators, or board of directors without shareholder acti	ion and shareholder
. The amendment(s) was we by the shareholders was/w	re adopted by the shareholders. The number of votes cast for the amendment ere sufficient for approval.	(s)
	re approved by the shareholders through voting groups. The following statem of for each voting group entitled to vote separately on the amendmentts).	ent
"The number of vote:	s cast for the amendment(s) was/were sufficient for approval	
by i		
	(voting group)	
	20. 2022	
Signature	Edn Par	
(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 compounted fiduciary by that tiduciary)	
	EDWIN ROER	
	(Typed or printed name of person signing)	
	p	

(Title of person signing)