## P19000087720

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## COVER LETTER +

TO: Amendment Section

Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

NAME OF CORPORATION: <u>WENWEN SPA</u> INC
DOCUMENT NUMBER: <u>\$ 1900087720</u>
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Sheny, ZhennjiAN Nami of Contact Person
Yongmei Cai L. Associales CPA P.A.
601 N Congress A-ve Ste 412
Delyay Beach FL 33445  City/ State and Zip Code
Youngmei Cpa (a) gmail. (om  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Trene Cai at 561 699 7886  Name of Contact Person Area Code & Daytime Telephone Number
Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee Set 1.75 Filing Fee & Set 1.75 Status Set 1.75
Mailing Address Amendment Section  Division of Grant Section
Division of Corporations Division of Corporations

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

## Articles of Amendment to Articles of Incorporation

(Name of Corporation as currently	filed with the Flor	ida Dont of State	· ì	
P19000087720	med with the Fior	tua Dept. of State	<u>:</u> /	
(Document Number of C	Corporation (if kno	wn)		•
Pursuant to the provisions of section 607.1006, Florida Statutes, this $Fl$ its Articles of Incorporation:	lorida Profit Corpo	eration adopts the	following	amendment(s) t
A. If amending name, enter the new name of the corporation:				
				The new
name must be distinguishable and contain the word "corporation," "co "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A "chartered," "professional association," or the abbreviation "P.A."				
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 <u>MAY BE A POST OFFICE BOX</u> )				10 21 6 1
D. If amending the registered agent and/or registered office address:			· Oi· ·	<del>- 宝一</del> 艺
Name of New Registered Agent ZHENG JIA	N She	219	· 	1
403 SOUTH (Florida stree	FEDER	ALHWY		
New Registered Office Address: POMPANO B	EACH	, Florida	33.8 (Zip Ci	<u> 26 2</u> ode)
New Registered Agent's Signature, if changing Registered Agent:  I hereby accept the appointment as registered agent. I am familiar with		bligations of the p	osition.	
Signature of New Reg	Sher	ranxink		

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	PT John Doc	
X Remove	V Mike Jones	
X Add		
	<u>\$V</u> <u>Sally Smith</u>	
Type of Action (Check One)	<u>Title</u> <u>Name</u>	<u>Addres</u> s
1) Change	P DAN JIANG	403 SOWTH FEDERALHI
Add		POMPANO BEACH
Remove		FL 33062
2) Change	P Zhengjian Sheng	403 South Federal HWY
Add	Ü	<u>Pompano Beach</u>
Remove Change		FL 33062
Add		
Remove		
4) Change		
Add		
Remove		
5) Change		
Add		
Remove		
6) Change		
Add		
Remove		
	Page 2 of 4	
E. If amending or ad	ding additional Articles, enter change(s) here:	

Γ.,	it amending or adome additional Vi-	ticies, enter change(s) nere:
	(Attach additional sheets, if necessary).	(Be specific)

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	e, reclassification, or cancellation of issued shares, tent if not contained in the amendment itself:	
		· · · · · · · · · · · · · · · · · · ·
· · · · · · · · · · · · · · · · · · ·		<del></del>
	·	
		<del></del>
	Page 3 of 4	
	rage 5 or 4	
The date of each amendment(s) adoption:		, if other than th
date this document was signed.		
Effective date <u>if applicable</u> :		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	· · · · · · · · · · · · · · · · · · ·
	processing to any appearance the many	

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were adopted to by the shareholders was/were sufficient	by the shareholders. The number of votes cast for the amendment(s) nt for approval.	
☐ The amendment(s) was/were approved	by the shareholders through voting groups. The following statement voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the	e amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were adopted baction was not required.	by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were adopted baction was not required.	by the incorporators without shareholder action and shareholder	
Dated 12/6/	2019	
Signature (X)	Meny Joan Sherry	
selected, by a	r, president or other officer – if directors or officers have not been an incorporator – if in the hands of a receiver, trustee, or other court duciary by that fiduciary)	
Z	hengjian Sheng (Typed or printed name of person signing)	
DY.	esi dent of person signing)	