P20000083852

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SECRETARY OF STATE
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Name Changl

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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassec, FL 32314

NAME OF CORPO						
DOCUMENT NUM	P20000083852 BER:					
The enclosed Articles	of Amendment and fee are su	bmitted for filing.				
Please return all corre	spondence concerning this ma	tter to the following:				
	Sharoon Dayana Cannon					
	Liamna Spa	Name of Contact Perso	n			
	2433 SE Elston St	Firm/ Company				
	Port Saint Lucie H 34952	Address				
		City/ State and Zip Cod	le	 vs	2	
	danah3@hotmail.es			ECR TAL	023 J	Name of the last o
	E-mail address: (to be us	ed for future annual report	notification)		JAN -	# F
For further information	on concerning this matter, pleas	se call:		ASSE!	9 AM	in .
Sharoon D Cannon		772 at (2037662			C
Name	of Contact Person		ode & Daytime Telephone l	Number	<u></u> 0	
Enclosed is a check for	or the following amount made	payable to the Florida Dep	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)			
Ain Div	#usskudress	Ameno Divisio	Address Marie Marient Section on of Corporations entre of Tallahassee			\#\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

(Name of Corporation as cur	rently filed with the Florida	Dept. of State)
P20000083852		
(Document Numb	ber of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, its Articles of Incorporation:	this Florida Profit Corporal	ion adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation Lianna MedSpa, Tree.	<u>n:</u>	The new
name must be distinguishable and contain the word "corporation "Inc.," or Co.," or the designation "Corp," "Inc," or "Co "chartered," "professional association," or the abbreviation "I	". A professional corporal	ated" or the abbreviation "Corp.,"
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	N/A	
		2023 J
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NIA	AH -9
		200 AR M
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ade N/A Name of New Registered Agent		ne name of the
N/A	da street address)	Placido.
New Registered Office Address:	(City)	, Florida (Zip Code)
New Registered Agent's Signature, if changing Registered A I hereby accept the appointment as registered agent. I am Jami.	liar with and accept the oblig	
Signature of No.	ew Registered Agent, if chan	ging
Check if applicable ☐ The amendment(s) is/are being filed pursuant to s. 607.0120 ((11) (e), F.S.	

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)

Example:

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.

X Change	<u>PT</u>	<u>John Doc</u>	
X Remove	<u>V</u>	Mike Jones	
_X Add	<u>\$V</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name N/A	<u>Addres</u> s
1)Change			
Add			
Remove 2) Change		N/A	
Add			
Remove 3) Change		N/A	
Add			
Remove 4) Change		N/A	. <u> </u>
Add			
Remove 5) Change		N/A	
Add			
Remove 6) Change		N/A	
Add			
Remove			

E. If amending or adding addition (Attach additional sheets, if necessity)	essary). (Be specifi	c)		
Z/A			•	
				<u> </u>
	<u> </u>			· · ·
<u> </u>				
			· · · · · · · · · · · · · · · · · · ·	
				
		·	· · ·	· · · -
				
				"
 If an amendment provides for provisions for implementing 	an exchange, reclas	sification, or cancel	lation of issued shares	ط
(if not applicable, indicate	NZ4)	or contained in the a	mienament usen.	
		-		
JA				
				···· -

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N/A

date this document was signed. N/Λ	option:, if other than the
Effective date if applicable:	
	(no more than 90 days after amendment file date)
Note: If the date inserted in this blo document's effective date on the Dep	ack does not meet the applicable statutory filing requirements, this date will not be listed as the artment of State's records.
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were adopt action was not required.	ted by the incorporators, or board of directors without shareholder action and shareholder
☐ The amendment(s) was/were adop by the shareholders was/were suff	ted by the shareholders. The number of votes cast for the amendment(s) ficient for approval.
	oved by the shareholders through voting groups. The following statement ach voting group entitled to vote separately on the amendment(s):
"The number of votes east fo	or the amendment(s) was/were sufficient for approval
by	<u> </u>
	(voting group)
January 4th, 1	2023
Dated_	
Signature	
(By a dire	ctof, president or other officer - if directors or officers have not been
	by an incorporator – if in the hands of a receiver, trustee, or other court d fiduciary by that fiduciary)
	haroon D. Cannon
_	(Typed or printed name of person signing)
Р	ST
_	(Title of person signing)