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2021 MAR 26 PM 6: 04
SECKE AND SEE STATE

COVER LETTER,

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: GE9 HEALTH AN	ND SPA CORP				
DOCUMENT NUMB	P21000016548					
The enclosed Articles of	of Amendment and fee are su	bmitted for filing.				
Please return all corres	pondence concerning this ma	tter to the following:				
	NAYARIT BRICENO					
-		Name of Contact Person	1			
	BW&T BUSINESS ADVISERS INC					
-	Firm/ Company					
	2750 SW 145th AVE SUITE 307					
•		Address				
	MIRAMAR, FL.33027					
-		City/ State and Zip Cod-	e			
	admin@accountingbwtba.co	m				
-	E-mail address: (to be us	sed for future annual report	notification)			
For further information	concerning this matter, plea		. 443-1594			
Name o	f Contact Person	at (Area Co	de & Daytime Telephone Number			
Enclosed is a check for	the following amount made					
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 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 Divisio The Co	Address unent Section of Corporations entre of Tallahassee N. Monroe Street, Suite 810			

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

FILED

2021 MAR 26 PM 6: 04 (Name of Corporation as currently filed with the Florida Dept. of State) SECRETARY OF STATE GE9 HEALTH AND SPA CORP (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: . Florida (City) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position. Signature of New Registered Agent, if changing

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)

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	$\underline{\mathbf{v}}$	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	P	MARIA RUGERO	8175 NW 104 AVE APT 26
Add X Remove			DORAL, FL. 33178
2) Change	<u> </u>	MARIA GABRIELA ESPINO	11301 NW 42 TERRACE
X Add			DORAL, FL. 33178
Remove 3) Change	VP	CINTHYA GARCIA SANTTI	11301 NW 42 TERRACE
XAdd			DORAL, FL. 33178
Remove			
4) Change			
Add Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	ts, if necessary).	(Be specific)			
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The date of each amendment(s)	adoption:	, if other than the
date this document was signed.		
Effective date if applicable:	(no more than 90 days after amendment file date)	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the	s block does not meet the applicable statutory filing requirements, this date will Department of State's records.	I not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were a action was not required.	adopted by the incorporators, or board of directors without shareholder action and	l shareholder
☐ The amendment(s) was/were a by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	
"The number of votes ca	ast for the amendment(s) was/were sufficient for approval	
by	"	
	(voting group)	
Dated	director, president opoliner officer – if directors or officers have not been	_
selec	ted, by an incorporator - if in the hands of a receiver, trustee, or other court	
арро	inted fiduciary by that fiduciary)	
	MARIA RUGERO	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	