## P21 0000 35061

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## COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPO	RATION: DENIS MARRER	O INC				
DOCUMENT NUM	P21000035061	<del></del>				
The enclosed Articles	of Amendment and fee are su	ibmitted for filing.				
Please return all corre	spondence concerning this ma	atter to the following:				
	ANA CLARA PIMENTA					
		Name of Contact Perso	n			
	TAX HOUSE MIAMI					
	Firm/ Company					
	301 NE 79TH STREET #2					
		Address				
	MIAMI, FL 33138					
		City/ State and Zip Cod	le			
	ANACLARA@TAXHOUSE	EMIAMI COM				
	<del>-</del>	sed for future annual report	t notification)			
	is man data oop, (to the all		, , , , , , , , , , , , , , , , , , , ,			
For further information	on concerning this matter, plea	se call:				
ANA CLARA PIMENTA		at (	615-2009			
Name of Contact Person		Area Co	ode & Daytime Telephone Number			
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	S43.75 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		Ameno Divisio	Address dment Section on of Corporations dentre of Tallahassee			

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

DENIS MARRERO INC

DENIS MARRERO INC		
(Name of Corporate P21000035061	tion as currently filed with the Fl	orida Dept. of State)
	ment Number of Corporation (if kr	nown)
Pursuant to the provisions of section 607.1006, Floric its Articles of Incorporation:	•	,
A. If amending name, enter the new name of the candidate the ANGEL HANDS THERAPEUTIC MASSAGE INC.	<del></del>	The new
name must be distinguishable and contain the word "c "Inc.," or Co.," or the designation "Corp," "Inc, "chartered," "professional association," or the abbr	." or "Co". A professional com	orporated" or the abbreviation "Corn"
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET ADDRESS)	<u>e:</u> DRESS )	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u> </u>	
D. If amending the registered agent and/or registe new registered agent and/or the new registered	red office address in Florida, ent office address:	er the name of the
Name of New Registered Agent		
	(Florida street address)	
New Registered Office Address:	11 rondu sireer aaaressy	F1 :1
New Negativea Office Address.	(City)	. Florida(Zip Code)
New Registered Agent's Signature, if changing Regineer hereby accept the appointment as registered agent.	istered Agent: I am familiar with and accept the c	obligations of the position.
Signa	nure of New Registered Agent, if ch	hanging
Theck 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.

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)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change	_	_	
Add			
Remove 3) Change			
Add			4
Remove			
4) Change			_
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			_
Add			
Remove			

	). (Be specific)
	<u> </u>
It an amendment provides for an exc	change, reclassification, or cancellation of issued shares, nendment if not contained in the amendment itself:
	nendment if not contained in the amendment itself.
(if not applicable, indicate N/A)	

.

The date of each amendment(s) adoption:	, if other than the
Effective date if applicable:	
(no more than 90 days after amendment file date)	
<b>Note:</b> If the date inserted in this block does not meet the applicable statutory filing requirements, the document's effective date on the Department of State's records.	is date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action was not required.	r action and shareholder
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment by the shareholders was/were sufficient for approval.	nent(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following stemust be separately provided for each voting group entitled to vote separately on the amendment(s):	atement
"The number of votes cast for the amendment(s) was/were sufficient for approval	200
by	2021 / 553 -
(voting group)	2); 1,
	-9
JULY 29TH 2021 Dated	730
man)	73a 
Signature	Ö.
(By a director, president or other officer – if directors or officers have not b	<u> </u>
selected, by an incorporator – if in the hands of a receiver, trustee, or other	court
appointed fiduciary by that fiduciary)	
LIEN MORENO	
(Typed or printed name of person signing)	
PRESIDENT	

(Title of person signing)