P03000097543

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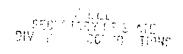
COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: MT WU TRADIN	G INC	· · · · · · · · · · · · · · · · · · ·
DOCUMENT NUM	BER: P03000097543		
	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	SULING WU		
	***	Name of Contact Persor	1
	MT WU TRADING INC		
	•	Firm/ Company	
	15655 SW 54TH CT		
		Address	
	MIRAMAR FL 33027		
		City/ State and Zip Code	•
	E-mail address: (to be us	sed for future annual report	notification)
For further information	n concerning this matter, pleas	se call:	
	•		596 0161
SULING WU		at (786	
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment of State:
\$35 Filing Fee	□\$43.75 Fiting 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)
Am Div P.O	iling Address endment Section ision of Corporations Box 6327 lahassee, FL 32314	Amend Divisio Clifton	Address Iment Section on of Corporations Building executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



12

(Name of Corporati	on as currently filed with the Florida De	ept. of State)
P03000097543		
(Docur	nent Number of Corporation (if known)	•
Pursuant to the provisions of section 607.1006, Florid its Articles of Incorporation:	a Statutes, this Florida Profit Corporation	adopts the following amendment(s) to
A. If amending name, enter the new name of the co	orporation:	
		The new
name must be distinguishable and contain the wor "Corp.," "Inc.," or Co.," or the designation "Corp word "chartered." "professional association," or the	," "Inc," or "Co". A professional corp	rporated" or the abbreviation poration name must contain the
B. Enter new principal office address, if applicable		
(Principal office address <u>MUST BE A STREET AD)</u>	<u>ORESS</u>)	
C. Enter new mailing address, if applicable:	NV)	
(Mailing address <u>MAY BE A POST OFFICE BC</u>	<u> </u>	
D. If amending the registered agent and/or registenew registered agent and/or the new registered		name of the
Name of New Registered Agent		
	(Florida street address)	. 100
New Registered Office Address:		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Re	vistered Agent	
I hereby accept the appointment as registered agent.		ions of the position

Signature of New Registered Agent, if changing

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	<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	PT	SULING WU	15655 SW 54TH CT
X Add			MIRMAR FL 33027
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
			
6) Change			
Add			
Remove			

The state of the s	cles, enter change(s) here: (Be specific)
· · · · · · · · · · · · · · · · · · ·	
4	
	<u></u>
	
914444	
If an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and
provisions for implementing the ame	ndment if not contained in the amendment itself:
provisions for implementing the ame	ndment if not contained in the amendment itself:
provisions for implementing the amer (if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
provisions for implementing the amer (if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
provisions for implementing the amer (if not applicable, indicate N/A)	ndment if not contained in the amendment itself:

	04/07/2016	
The date of each amendment(s) a date this document was signed.	doption:	if other than the
Effective date if applicable:		16 ADD 1.
	(no more than 90 days after amendment file date)	16 APR 14 PM 2: 12
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing requirements, epartment of State's records.	this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were ac by the shareholders was/were s	opted by the shareholders. The number of votes cast for the amenufficient for approval.	dment(s)
	proved by the shareholders through voting groups. The following reach voting group entitled to vote separately on the amendment(
"The number of votes cas	t for the amendment(s) was/were sufficient for approval	
by	." (voting group)	
	(voting group)	
The amendment(s) was/were ac action was not required.	opted by the board of directors without shareholder action and sha	reholder
☐ The amendment(s) was/were action was not required.	opted by the incorporators without shareholder action and shareho	lder
04/07/201 Dated	6	
Signature	director dresident or other officer – if directors or officers have no	nt been
select	ed, by an incorporator – if in the hands of a receiver, trustee, or other fiduciary by that fiduciary)	
	SULING WU	
	(Typed or printed name of person signing)	.
	PRESIDENT	
	(Title of person signing)	* 17 - 18 - 19 - 19 - 19 - 19 - 19 - 19 - 19