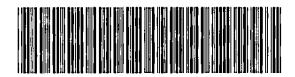
## P13000100664

| (Requestor's Name)   |
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| PICK-UP WAIT MAIL  |
| (Business Entity Name)   |
|  |
| (Document Number)  |
| Certified Copies Certificates of Status  |
| Special Instructions to Filing Officer:  |
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## FLORIDA DEPARTMENT OF STATE Division of Corporations

\*\*\*

June 18, 2021

CHINA CAREER CENTER INC. 619 MISTY POND COURT BRADENTON, FL 34212

SUBJECT: CHINA CAREER CENTER INC.

Ref. Number: P13000100664

We have received your document for CHINA CAREER CENTER INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for Florida Profit Benefit Corp.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Jessica A Fason Regulatory Specialist II

Letter Number: 621A00013838

an additional \$18.75 for a Certificate of Status.

\* Here is the proper form, Plus

## COVER LETTER

**TO:** Amendment Section Division of Corporations

| NAME OF CORPOR   | RATION: CHINA CAREER                        | CENTER INC.  |  |
|--|---|--|--|
| DOCUMENT NUMI  | BER: P13000100664                           |  | <del>-</del>   |
|  | of Amendment and fee are si                 | abmitted for filing.   |  |
| Please return all corre  | spondence concerning this ma                | atter to the following:  |  |
|  | Andrew J. Warner                            |  |  |
|  |   | Name of Contact Person   | 1  |
|  | CHINA CAREER CENTER                         | INC.   |  |
|  | <del></del>                                 | Firm/ Company  |  |
|  | 619 Misty Pond Court                        |  |  |
|  |   | Address  |  |
|  | Bradenton, FL 34212                         |  |  |
|  |   | City/ State and Zip Cod  | <u> </u>   |
|  | ajwarner123@ me.com                         |  |  |
|  |   | sed for future annual report   | notification)  |
|  |   | ·· · · · · · · · · · · · · · · · · ·   |  |
| For further informatio   | n concerning this matter, plea              | se call:   |  |
| Andrew J. Warner   |   | at ( <u></u>   | 2861861  |
| Name o   | of Contact Person                           | Area Co  | de & Daytime Telephone Number  |
| Enclosed is a check fo   | r the following amount made                 | payable to the Florida Depa  | 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) |
| Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 |   | Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 |  |

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

| CHINA CAREER CENTER INC.  |   |                           |
|---|---|---------------------------|
| (Name of Corporation as co  | urrently filed with the Florida Dept. of State    | )                         |
| P13000100664  |   |                           |
| (Document Nu  | imber of Corporation (if known)                   |                           |
| Pursuant to the provisions of section 607,1006. Florida Statute its Articles of Incorporation:  | es, this Florida Profit Corporation adopts the fo | ollowing amendment(s) to  |
| A. If amending name, enter the new name of the corporat<br>INNOVATIONS INTERNATIONAL, INC   | tion:   | 99                        |
| name must be distinguishable and contain the word "corporate "Inc.," or Co.," or the designation "Corp," "Inc." or "Contain the abbreviation "chartered." "professional association," or the abbreviation | Co". A professional corporation name must         |                           |
| B. Enter new principal office address, if applicable:   | N/A   |                           |
| (Principal office address MUST BE A STREET ADDRESS  | )   | 202                       |
|   |   |                           |
| 20.10.5   |   | 26                        |
| C. Enter new mailing address, if applicable:<br>(Mailing address <u>MAY BE A POST OFFICE BOX</u> )  | N/A   | SS C <b>≥</b> 11          |
|   |   |                           |
|   |   | ~                         |
|   | ·   | <u>्राप्ते <b>५०</b> </u> |
| D. If amending the registered agent and/or registered office new registered agent and/or the new registered office a  |   |                           |
| Name of New Registered Agent N/A  |   |                           |
|   |   | <del></del>               |
| ·-····································  | orida street addressi                             | <del></del>               |
|   |   |                           |
| New Registered Office Address:  | , Florida,  | (Zip Coder                |
|   | **  |                           |
| New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am far  |   | sition                    |
| Signature of  | New Registered Agent, if changing                 |                           |
|   | Acta Registered Agent, if enoughing               |                           |
| Check if applicable  If The amendment(s) is/are being filed pursuant to s, 607,012  | 20 (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; F. 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 PSF 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<br>(Check One) | <u>Title</u>             | <u>Name</u> | <u>Addres</u> s |
| 1) Change                     |                          | N/A         |                 |
| Add                           |                          |             |                 |
| Remove                        |                          |             |                 |
| 2) Change                     |                          |             |                 |
| Add                           |                          |             |                 |
| Remove 3 ) Change             |                          | <u> </u>    |                 |
| Add                           |                          |             |                 |
| Remove                        |                          |             |                 |
| 4) Change                     |                          | _           |                 |
| Add                           |                          |             |                 |
| Remove                        |                          |             |                 |
| 51 Change                     |                          |             |                 |
| Add                           |                          |             |                 |
| Remove                        |                          |             |                 |
| 6) Change                     |                          |             |                 |
| Add                           |                          |             |                 |
| Remove                        |                          |             |                 |
|                               |                          |             |                 |

| Attach additional sheets, if necessary)   | ), (Be specific)                      |                              |             |
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|   | change, reclassification, or c        | ancellation of issued shares | •           |
| lf an amendment provides for an ex  | nendment if not contained in          | the amendment itself:        |             |
| provisions for implementing the ar  | Hencement in not contained in         |                              |             |
| f an amendment provides for an ex-<br>provisions for implementing the ar-<br>(if not applicable, indicate NA) | ikudinen ir ubt contained ir          |                              |             |
| provisions for implementing the an<br>(if not applicable, indicate N A)                                       | nenomene ii not comanico ii           |                              |             |
| provisions for implementing the ar<br>(if not applicable, indicate N A)                                       | Tentinera in incomance in             |                              |             |
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| The date of each amendment(s) ac  | N/A  | , if other than the                            |
|---|--|--|
| date this document was signed.  | тория  | . It office than the                           |
| N/A   |  |  |
| Effective date <u>if applicable</u> :                                       | (no more than 90 days after amendment)   | ile dater                                      |
| Note: If the date inserted in this b<br>document's effective date on the De | lock does not meet the applicable statutory filing requartment of State's records.   | pirements, this date will not be fisted as the |
| Adoption of Amendment(s)  | ( <u>CHECK ONE</u> )   |  |
| The amendment(s) was/were ado action was not required.                      | pted by the incorporators, or board of directors withou  | t shareholder action and shareholder           |
| ☐ The amendment(s) was/were ado<br>by the shareholders was/were su          | pted by the shareholders. The number of votes cast fo fficient for approval.   | r the amendment(s)                             |
|   | roved by the shareholders through voting groups. The each voting group entitled to vote separately on the an   |  |
| "The number of votes cast   | for the amendment(s) was/were sufficient for approval  |  |
| hy  |  |  |
|   | (voting group)   |  |
| Dated   | 19 202   War rectof, president or other officer – if directors or office   | es house not have                              |
| selected  | tector, president or other officer = if directors of officer<br>l, by an incorporator = if in the hands of a receiver, true<br>ed fiduciary by that fiduciary) |  |
|   | Andrew J. Warner   |  |
|   | (Typed or printed name of person signing)  |  |
|   | President  |  |
|   | (Title of person signing)  |  |