F10000002068

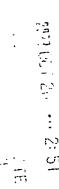
(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					

Office Use Only



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09/05/23--01039--017 **35.00



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FLORIDA DEPARTMENT OF STATE Division of Corporations

September 25, 2023

LENA CHEUNG 877 MAHLER ROAD, 2ND FLOOR BURLINGAME, CA 94010

SUBJECT: KERRY FREIGHT (USA) INCORPORATED

Ref. Number: F10000002068

IKIlo.

Attourned is the carected form that is filled out and complete. Thank you

We have received your document for KERRY FREIGHT (USA) INCORPORATED 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 a Florida Profit Corporation, but your entity is a Foreign Profit Corporation. Please complete and return the enclosed blank form(s).

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) 245-6050.

Morgan E Lovett Regulatory Specialist II

Letter Number: 223A00022106

027 202.7

COVER LETTER

TO: Amendment Se	ction Division of Corporati	ons			
SUBJECT: KERR	y FREIGHT (USA)				
	_	e of Corporation			
DOCUMENT NUMBE	R: F1000000200	<u>08</u>			_
The enclosed Amendment	nt and fee are submitted for	filing.			
Please return all correspo	ondence concerning this ma	itter to the following:			
LENA CHE	tunis				
Nai	ne of Contact Person				
KERRY AP	EX (SFU)				
	Firm/Company				
877 MAHER RO	, 2 ^{MD} FLUOR				
	Address	-			
BURUNGAME, C	A 94010				
Ci	ty/State and Zip Code				
U.S. KAPEX. ACCT	. ADMIN @ KERRYA	IPEX. COM			
E-mail address: (to	be used for future annual r	eport notification)			
For further information c	oncerning this matter, plea	se call:			
LENA CHEUNG		at (<u>VS)</u> Area Code & E	569-20	575	
Name of Co	ontact Person	Area Code & E	Daytime T	elephone Number	
Enclosed is a check for t	he following amount:				, e
_	\$43.75 Filing Fee & ertificate of Status	S43.75 Filing l Certified Copy	Fee &	☐ \$52.50 Filing Certificate of S Certified Copy	tatus &
					<u></u>
Mailing Address		Semine Addre	ure t		

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

PROFIT CORPORATION APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO APPLICATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

(Pursuant to s. 607.1504, F.S.)

SECTION I (1-3 MUST BE COMPLETED)

	(Document number of con			
		poration (it known)		
KERRY FREIGHT (USA)	INCORPORATED			
		records of the Department of State		
DELAWARE		$\frac{12 / 36 / 2606}{\text{(Date authorized to do bu)}}$		
(Incorporated unde	laws of)	(Date authorized to do bu	siness in Florida)	
	SECTION			
(4-	7 COMPLETE ONLY THE A	PPLICABLE CHANGES)		
if the amendment changes the name of incorporation?			s jurisdiction of	
incorporation? Pyv				
(Name of corporation after the amenda		n	and a abbeau	iation
(Name of corporation after the amenda not contained in new name of the corpo	nent, adding suffix "corporation, oration)	" "company, or "incorporated, "c	г арргоргіаце аобтеу	ratioi
(If new name is unavailable in Florida,	enter alternate corporate name a	dopted for the purpose of transacti	ing business in Floric	<u>da)</u>
If the amendment changes the peri	ad af duration, indicate now per	iod of duration		
If the amendment changes the peri	ou of duration. Maleure he w per	TOTAL OF GRANGESTI.		
	<u> </u>			
	(New dura	tion)	<u> </u>	23 (
			. •	(=-
If the amendment changes the juri	sdiction of incorporation, indica	te new jurisdiction.	± 5.	
	(New jurisd	iction)		
	(, • j	,	-1 >-	5:51
If amending the registered agent and	Vor registered office address i	n Florida, enter the name of the		_
new registered agent and/or the new	registered office address:		•	
N. C.N. D. Steine I. Same	ЙA			
Name of New Registered Agent		 		
	(Florida strvet a	ddress)		
New Registered Office Address:		, Florida_		
New Negisterea Office Address.	(City)		(Zip Code)	
New Registered Agent's Signature, I hereby accept the appointment as res	<mark>it enanging Registered Agent:</mark> vistered avent. I am familiar w	ith and accept the obligations of th	'ie position.	
uccept ins upproximited an reg	seeres an indiana. It many many and		•	
Cimentura of Nov. R.	egistered Agent, if changing			
Digitation by their re-	Secretary and the Secretary of the Secretary Secretary			

9. If the amendment changes person, title or capacity in accordance with 607.1504 (4), indicate that change:

Title/ Capacity	<u>Name</u>	<u>Address</u>	Type of Action
PIRECTOR	HOTHIEU VINCENT RENAMO-PARON	16/F, KERRY CARGO CTR	
		55 WING KEI RD, HONG FONG	S, HK Kemove
DIRECTOR	SHEUNG CHAN	077 MAHUER KD, 2 NO FL	DOK KAdd
		BURLINGAME CA 94010	Remove
			Qadd
			©Remove
			Remove
			□Add 、
			□Add
10. Attached is a of the applica under the law	certificate or document of similar import, evition to the Department of State, by the Secreta of which it is incorporated.	idencing the amendment, authenticated not ry of State or other official having custody o	•
	(Signature of a directo	or, president or other officer - if in the hand	
	a receiver or other co	urt appointed fiduciary, by that fiduciary) (1000 Kc) (Title of pers	

FILING FEE \$35.00