N1400008321

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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Special Instructions to Filing Officer:
Nikia thillips gave verbas
pormission to check box
Nikia Phillips gave verbal pormission to check box on page 4. TC. 5/28
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Office Use Only



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"SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MAY 2 & 2015 T CANNON



May 13, 2015

NIKIA L PHILLIPS THE CHINA FOUNDATION, INC. 3440 HOLLYWOOD BLVD., SUITE 415 HOLLYWOOD, FL 33021 US

SUBJECT: THE CHINA FOUNDATION, INC.

Ref. Number: N14000008321

We have received your document for THE CHINA FOUNDATION, INC. and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please check the appropriate box on the amendment form regarding the adoption of the amendment(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.

Tina D Cannon Regulatory Specialist II

Letter Number: 615A00010074

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: 1 he China Foundation the
DOCUMENT NUMBER: 14 00000 832 1
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Nikia L. Phillips
(Name of Contact Person)
The China Foundation Inc
(Firm/ Company)
340 Hollywood BlvD Ste 415
(Address)
Hollywood, Fl. 3302) (City/ State and Zip Code)
(City/ State and Zip Code)
Trechinafoundation 14@ Gmoil. Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
rules I dille
(Name of Contact Person) at 305-502.8625 (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee \$\bigcup \\$43.75 Filing Fee \& Certificate of Status Certified Copy (Additional copy is enclosed) \$\bigcup \\$35 Filing Fee \& Certified Copy (Additional Copy is Enclosed)
Mailing Address Amendment Section Street Address Amendment Section

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

The China Foundation	
(Name of Corporation as currently filed with the Florida Dept. of State)	
MH0000 8321	
(Document Number of Corporation (if known)	
The state of the s	lawina
Pursuant to the provisions of section 617.1006, Florida Statutes, this <i>Florida Not For Profit Corporation</i> adopts the fol amendment(s) to its Articles of Incorporation:	lowing
A. If amending name, enter the new name of the corporation:	
T	ie new
name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or	
"Company" or "Co." may not be used in the name.	
B. Enter new principal office address, if applicable: 3440 HONGE BIVD St	<u>:415</u>
(Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable:	. 7
(Mailing address MAY BE A POST OFFICE BOX)	NEC SEC
	AN AN
D. If amending the registered agent and/or registered office address in Florida, enter the name of the	P SI
new registered agent actions and new registered states and a second states are a second states and a second states are a second states and a second states are a second state are a second states are a second state are a se	ORI ORI
Name of New Registered Agent: Alshandra Chino	2 Om
340 Haluwari BlvD StE 415	
New Registered Office Address: New Registered Office Address:	
New Registerea Office Address.	5 l
Hollywood, Florida 50	
City) (Zip Code)	
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	

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 X Remove X Add	PT John Doe V Mike Jones SV Sally Smith	
Type of Action (Check One)	<u>Title</u> <u>Name</u>	Address
1) Change	V Jakia Thomas	340 Hollywood Blvs Ste 415
Remove	Q , , , ,	. Hollywood, Ft. 33021
2) Change Add	5 Lindo Seecs	3440 Hollywood Blus Ste 415
Remove 3) Change		Halywood, F1.33021
Add	· ·	SECRETA ALLAHAS 15 MAY 2
4) Change Add Remove		ILED RY OF STATE RY OF STATE RY OF STATE RY OF STATE 10
5) Change Add		
Remove		
6) Change Add		
Remove		

	
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	this document was signed.	, if other than the
Effe	ective date if applicable: 30 15 (no more than 90 days after amendment file date)	
	e: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be ument's effective date on the Department of State's records.	listed as the
Ada	option of Amendment(s) (<u>CHECK ONE</u>)	
	The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.	
X	There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.	
	Signature (By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary) (Typed or printed name of person signing) (Title of person signing)	FILED TARY OF ASSEE, F
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