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Amenda

JUN 2 4 2019 I ALBRITTON

COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

DAO TRANG HINAME OF CORPORATION:	JONG SEN, INC		
N16000002405 DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are s			
Please return all correspondence concerning this ma	atter to the following:		
SAU T NGUYEN			
	(Name of Contact	Person)	
<u> </u>	(Firm/ Compa	ny)	
8813 W. PATTERSON ST			
	(Address)	 	
TAMPA FL 33615			
	(City/ State and Zi	p Code)	
E-mail address: (to be u	sed for future annual r	eport notificatio	n)
For further information concerning this matter, plea		•	
SAU T NGUYEN		813 at	
(Name of Contact Pers	son)	(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount made	payable to the Florida	a Department of	State:
☐ \$35 Filing Fee ☐\$43.75 Filing Fee Certificate of State	& \$\subset\$\$ \$\\$43.75\$ Filing Fe us Certified Copy (Additional copy enclosed)	Certif y is Certif (Addi	0 Filing Fee ficate of Status fied Copy fitional Copy is fosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327	[Street Address Amendment Sect Division of Corp Elifton Building	

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

DAO TRANG HUONG SEN, INC.

(Name of Company in a cour	mantle filad wit	h the Cleride Dent of	F State)	
(Name of Corporation as cur	rentry med wit	<u>n the Florida Dept. of</u>	(State)	
N16000002405				
(Document Nu	imber of Corpor	ation (if known)		
Pursuant to the provisions of section 617.1006, Florida Sta amendment(s) to its Articles of Incorporation:	itutes, this <i>Flori</i> d	da Not For Profit Cor _l	<i>poration</i> adopts th	e following
A. If amending name, enter the new name of the corpo	ration:			
				The new
name must be distinguishable and contain the word "corpo" "Company" or "Co." may not be used in the name.	oration" or "inc	corporated" or the abb	oreviation "Corp."	or "Inc."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRE.	<u>SS</u>)			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)				2019.
				;
				-0
D. If amending the registered agent and/or registered onew registered agent and/or the new registered office		n Florida, enter the n	ame of the	P/112: 25
Name of New Registered Agent:		·		
	(Florida street ada	dress)		
New Registered Office Address:				
			, Florida	
	(City)		(Zip Code)	
New Registered Agent's Signature, if changing Register I hereby accept the appointment as registered agent. I an		and accept the obligation	ons of the position	
	-	,	- •	
	Signature of N	Vew 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	<u>V</u> <u>Mil</u>	n Doe se Jones sy Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	VP	ANDY T TRAN	4073 41ST AVE N
Add			ST PETERSBURG FL 33714
X Remove			
2) Change	VP	MAI N TU	2866 STATE RD 590
X Add			CLEARWATER FL 33759
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

amending or adding additional Article ttach additional sheets, if necessary). (Be specific)					
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		· · · · · · · · · · · · · · · · · · ·	 -	<u> </u>		
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	date of each amendme		, if other than the
date	this document was sign	ed.	
Effe	ective date <u>if applicable</u>	06/05/2019 :	
		(no more than 90 days after amendment file date)	
		n this block does not meet the applicable statutory filing requirements, this date will not be in the Department of State's records.	e listed as the
Ado	option of Amendment(s	s) (<u>CHECK ONE</u>)	
	The amendment(s) was was/were sufficient for	s/were adopted by the members and the number of votes cast for the amendment(s) approval.	
	There are no members adopted by the board of	or members entitled to vote on the amendment(s). The amendment(s) was/were of directors.	
	Dated	615/19	
	Signature 1	guyeathrisesan	-
	hav	the chairman or vice chairman of the board, president or other officer-if directors e not been selected, by an incorporator – if in the hands of a receiver, trustee, or er court appointed fiduciary by that fiduciary)	
	:	SAU T NGUYEN	
	_	(Typed or printed name of person signing)	
	1	PRESIDENT	
	_	(Title of person signing)	