N23000002037

(Red	questor's Name)	
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of polislavias

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATIO	FLORIDA CHINES N:	E GOLF CLUB, IN	C	
DOCUMENT NUMBER:	V23000002037			
The enclosed Articles of Ame				-
Please return all corresponder	ice concerning this matte	er to the following.		
Youshan Zhao				
		(Name of Contact P	erson)	
CPA Services				
		(Firm/ Compan	y)	
618 Osprey Lakes Cir				
		(Address)		
Chuluota, FL 32766				
	-	(City/ State and Zip	Code)	
taxorlando@gmail.com				
E-n	nail address: (to be used	for future annual rep	ort notification	
For further information concer	ning this matter, please	call:		
Youshan Zhao		at	724	
7)	lame of Contact Person)		(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following	owing amount made pa	yable to the Florida I	Department of S	State:
■ \$35 Filing Fee	343.75 Filing Fee & (Certificate of Status	□\$43.75 Filing Fee of Certified Copy (Additional copy is enclosed)	Certific Certific	Filing Fee cate of Status ed Copy is sed)
Mailing Add	<u>lress</u>	Str	eet Address	

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

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

FLORIDA CHINESE GOLF CLUB, INC

TEORISM CHINESE COLL CECE, 11.0	2000 000
(Name of Corporation as currently filed with the Florida Dept. of State)	2023 CCT -5 PH 4: 36
N23000002037	
(Document Number of Corporation (if known	own)
Pursuant to the provisions of section 617,1006, Florida Statutes, this <i>Florida Not For amendment(s) to its Articles of Incorporation</i> :	Profit Corporation adopts the following
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation" or "incorporated" "Company" or "Co." may not be used in the name.	or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered office address in Florida, e	enter the name of the
new registered agent and/or the new registered office address:	
Name of New Registered Agent:	<u> </u>
(Flor <u>New Registered Office Address:</u>	rida street address)
	, Florida
(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	he obligations of the position.
Signature of New Register	red Agent, if changing

and address of each Offication additional sheets, Please note the officer/dir P = President; V= Vice P Executive Officer: CFO = held. President, Treasure	cer and/e if necess vector title resident; c Chief Fi r, Directo	or Director being added: ary) e by the first letter of the office titl T = Treasurer: S = Secretary: D = inancial Officer. If an officer/dire or would be PTD.	EDirector; $IR = I$ rustee; $C = C$ nairman or Clerk; $CIO = C$ meter vector holds more than one title, list the first letter of each office
Changes should be noted a change, Mike Jones lea Mike Jones, V as Remove	ves the co	orporation, Sally Smith is named t	Doe is listed as the PST and Mike Jones is listed as the V . There is the V and S . These should be noted as John Doe, PT as a Change,
Example: X Change X Remove X Add	<u>PT</u> <u>Y</u> <u>SV</u>	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
Change Add Remove		_	
2) Change Add			
Remove 3) Change Add Remove		_	
4) Change Add			
Remove			
5) Change - Add	_		
Remove			
6) Change Add			
E. If amending or add		tional Articles, enter change(s) h cessary). (Be specific)	lere:
			c purposes under Section 501(c)(3) of the Internal
experiencing financial h		g section of any future rederal tax	code. The purpose is to support Chinses golfer that

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	9/	21/2023				i Carala and Abanda Aban
The date of each amendment	s) adoption:				<u> </u>	, if other than the
date this document was signed.						
Decasion data if and limber	9/21/2023					
Effective date if applicable:	han	nore than 90 day.	e after amonda	ant file detail		
	(110 11	поле шап эн аау.	зары ателат	in the unit		
Note: If the date inserted in thi	s block does not	meet the annies	ble statutory fil	ino reanitemer	nts, this date will no	t be listed as the
document's effective date on the	e Department of	State's records	iore statutory III	s . oqun enici	, the bate vill lie	
document 5 erroure date on th	o Dopai unem Of	Care s records.				
Adoption of Amendment(s)	(CE	IFCK ONE)				

The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.

D . 1	9/21/2023
Dated	
	1 roly in
Signature	e 2 / Carrier de la
	have not been selected, by an incorporator – if in the hands of a receiver, trustee, or
	other court appointed fiduciary by that fiduciary)
	other court appointed fiduciary by that fiduciary) Tao Wang