## P02000099395

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## **COVER LETTER**

TO: Amendment Section

Tallahassee, FL 32314

**Division of Corporations** NAME OF CORPORATION: MICI, ZNC P 020000 99395 **DOCUMENT NUMBER:** The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Jae Seung Knoh Firm/ Company 1111 Park Centre Blvd For further information concerning this matter, please call: TaeSeury Rnoh at (305) 705 - 3866
Name of Contact Person Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: 535 Filing Fee ☐ \$43.75 Filing Fee & ■ \$43.75 Filing Fee & ☐ \$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed) **Mailing Address** Street Address Amendment Section Amendment Section **Division of Corporations Division of Corporations** P.O. Box 6327 Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

## **Articles of Amendment** ₫o **Articles of Incorporation**

	ticles of Amendment	• .
Arti	icles of Incorporation	From R
	of	Jan Jan
Mici , INC.		Dept. of State)  11 MAY 31 PM 2: 06
(Name of Corporation as currently	•	Dept. of State) 100 PM 2: 0
P02000	0 99395	CANAGE AND AND
	of Corporation (if know	n) (On) (On)
Pursuant to the provisions of section 607.1006, F amendment(s) to its Articles of Incorporation:	lorida Statutes, this Floa	rida Profit Corporation adopts the following
A. If amending name, enter the new name of the	corporation:	
name must be distinguishable and contain the abbreviation "Corp.," "Inc.," or Co.," or the des name must contain the word "chartered," "professi  B. Enter new principal office address, if applical (Principal office address MUST BE A STREET A.  C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE II)  D. If amending the registered agent and/or registered agent and/or the new registered.	ignation "Corp," "Inc,' ional association," or th  ble: DDRESS)  BOX	or "Co". A professional corporation in abbreviation "P.A."
Name of New Registered Agent:	·, ·	
New Registered Office Address:	(Florida street add	,
<del></del>	(City)	, Florida (Zip Code)
New Registered Agent's Signature, if changing R I hereby accept the appointment as registered agent	legistered Agent:	d accept the obligations of the position.

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)

Title `	Name	Address	Type of Action
. <u>President</u>	Young H. Lee	4953 NW 94+4 DOTAL, EC 33198	_
			- _ □ Add
			_ □ Add _ □ Remove -
provisions	dment provides for an exchange, reclast for implementing the amendment if not applicable, indicate N/A)		

The date of each amendment(s) a	adoption:		5/1/2011
Effective date if applicable:		ate of adoption is required)	5/1/2011
(no	o more than 90 day	ys after amendment file date	) / /
Adoption of Amendment(s)	(CHECK	K ONE)	
The amendment(s) was/were ac by the shareholders was/were s			tes cast for the amendment(s
The amendment(s) was/were ap must be separately provided for			
"The number of votes cast	for the amendmer	nt(s) was/were sufficient for	approval
by		,,,	
(voi	ting group)		
action was not required.  The amendment(s) was/were action was not required.	dopted by the inco	rporators without sharehold	er action and shareholder
Dated	/1/2011 (navy)		
Signature <u>(</u>	nkry)	Your	
(By a di selected	irector, president o	or other officer – if directors or – if in the hands of a rece	
_	Youn	Un-Sup or printed name of person sig	ming)
		esident	şınıng <i>)</i>
_	(Title of pers	son signing)	