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Amend

APR 2 2 2013

T. BROWN

COVER LETTER

TO: Amendment Section
Division of Corporations

AME OF CORPORATION: ASIAHI, INC
OCUMENT NUMBER: P80000 45242
he enclosed Articles of Amendment and fee are submitted for filing.
ease return all correspondence concerning this matter to the following:
Name of Contact Person ASIA # 1, Inc Firm/ Company George Sheridan St Address Holly wood Fe 33024 City/ State and Zip Code
Firm/Company Sheridan St
Holly wood for 33024 City/ State and Zip Code
E-mail address: (to be used for future annual report notification)
or further information concerning this matter, please call:
Wang Imp Xu at (&86) 898 3913 Name of Contact Person Area Code & Daytime Telephone Number
Name of Contact Person Area Code & Daytime Telephone Number nclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee Certificate of Status \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) Certified Copy (Certified Copy is enclosed) Certified Copy (Certi
Mailing Address Street Address

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

OIVISION OF CORPORATIONS

13 APR 16 PM 2:29

Articles of Amendment to Articles of Incorporation

ASIA #1 Inc.	
(Name of Corporation as currently filed with the Florida Dept. of State)	_
(Document Number of Corporation (if known)	_
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following the Articles of Incorporation:	ng amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must word "chartered," "professional association," or the abbreviation "P.A."	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	_
(Timequi office duaress <u>most be (ISTREET /INDRESS</u>)	_
	_
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, enter the name of the new registered agent and/or the new registered office address:	
Name of New Registered Agent Grog Sherican St (Florida street address) New Registered Office Address: Hollywood (City) (City) Name of New Registered Agent Group Sherican St (Florida street address) (City) (City)	
grog Sheridan st	
(Florida street address)	
New Registered Office Address: Hollywood, Florida 3304	
(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.	
in co, accept the appointment as registered agent.	
Signature of New Registered Agent, if changing	
Signature of New Applicated 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 <math>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: XChange	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change	P	Wang Jang Ru	1409 Shoridam St Howwood Fr 35024
_X Add			Hourwood Fr 33024
Remove			
2) X Change		Zi Qing Chen	9409 Shevidan St Houywood FL 33024
Add			Hondmand Fr 22224
Remove			<u></u>
3) Change			·
Add			
Remove			
4) Change			
Add	4		
Remove			
5) Change			-
Add			
Remove			
6) Change			
Add			
Remove			

	Attach additional sheets, if necessary). (Be specific)				
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f an amendi provisions f (if not a	nent provides for an e or implementing the a oplicable, indicate N/A	xchange, reclassi mendment if not)	fication, or canc contained in the	ellation of issued : amendment itsel	shares, f:
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The date of each amendment(s) adopt	ion: 3/10/2013
Effective date if applicable:	(no more than 90 days after amendment file date)
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were adopted by the shareholders was/were suffici	by the shareholders. The number of votes cast for the amendment(s) ent for approval.
	ed by the shareholders through voting groups. The following statement h voting group entitled to vote separately on the amendment(s):
"The number of votes cast for t	he amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
☐ The amendment(s) was/were adopted action was not required.	by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were adopted action was not required.	by the incorporators without shareholder action and shareholder
Dated3/(°/	2013
Signature 7	1013 1613
	or, president or other officer – if directors or officers have not been an incorporator – if in the hands of a receiver, trustee, or other court
	iduciary by that fiduciary)
_W	(Typed or printed name of person signing)
	(Typed or printed name of person signing)
1	(Title of person signing)
	(Title of person signing)