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OCT 2 2 2019 S. YOUNG

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR.	ATION: LEON LIN INC		
DOCUMENT NUMB	ER: P09000051723		
	f Amendment and fee are su	bmitted for filing.	
Please return all corresp	ondence concerning this ma	tter to the following:	
1	EON LIN		
_		Name of Contact Person	1
-		Firm/ Company	
(8400 46TH AVE., N. #48		
-		Address	
I	KENNETH CITY, FL 33709) 	
		City/ State and Zip Cod	e
LEON	7788@HOTMAIL.COM		
	E-mail address; (to be us	sed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
SI MING LIN		347	de & Daytime Telephone Number
Name of Contact Person		Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□852.50 Filing Fee Corntheate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amenc Divisio Clifton	Address Iment Section on of Corporations (Building Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

LEON LIN INC					
(Name o	f Corporation as currently	filed with the Florida Dept	. of State)		
P09000051723					
	(Document Number of	Corporation (if known)			
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, this I	Horida Profit Corporation ac	lopts the following an	iendment(s)	ı tc
A. If amending name, enter the new na	ime of the corporation:				
				e new	
name must be distinguishable and con- "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ution "Corp." "Inc." or "C	[70] A professional corpore	orated or the abbre ution name must cont	viation ain the	
B. Enter new principal office address,					
(Principal office address <u>MUST BE A STREET ADDRESS</u>)		6400 46TH AVE., N. #48			
		KENNETH CITY, FL 33709			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		6400 46TH AVE., N. #48			
		KENNETH CITY, FL 33709			
			· · · · · · · · · · · · · · · · · · ·		
D. If amending the registered agent an	d/or registered office addr	ess in Florida, enter the nar	ne of the		
new registered agent and/or the new					
Name of New Registered Agent SI MING LIN					
	6400 46TH AVE., N. #48				
	(Florida str	vet address)			
New Registered Office Address:	KENNETH CITY		_, Florida		
		(Ciψ)	(Zip Code	19	
			<u> </u>	Ď	
			<u> </u>	· 8 -	r-1
New Registered Agent's Signature, if e I hereby accept the appointment as regis	hanging Registered Agent: jered agent. I am familiar v	with and accept the obligation	is of the position \subset :-		1
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	•,	11	<u> </u>		7
				- 	5
	my				
	Signature of New R	egistered Agent, if changing	E	I 79	
			-	*	

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.

X_Change	PT John	<u>i Doe</u>	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
\underline{X} Add	<u>SV</u> <u>Sally</u>	y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	P	LEON LIN	6400 46TH AVE., N. #48
Add			KENNETH CITY, FL 33709
X Remove			
2) Change	P	SI MING LIN	6400 46TH AVE., N. #48
X Add			KENNETH CITY, FL 33709
Remove			
3) Change			
Add			
Remove			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: 1if not applicable, indicate N/A)	
provisions for implementing the amendment if not contained in the amendment itself:	
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provisions for implementing the amendment if not contained in the amendment itself:	
tif not applicable, indicate N/A)	
•	
	

	10/01/2019	ie a d. a.
The date of each amendment(s) ad date this document was signed.	option:	, if other than the
1(1/0)	/2019	
Effective date <u>if applicable</u> :	(no more than 90 days after amendm	vent tile date1
	tas mae tami so duys dites inneansi	cm factuate)
Note: If the date inserted in this bl document's effective date on the Dep	ock does not meet the applicable statutory filing partment of State's records.	requirements, this date will not be fisted as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were ado by the shareholders was/were suf	oted by the shareholders. The number of votes cas ficient for approval.	t for the amendment(s)
	roved by the shareholders through voting groups. Pach voting group entitled to vote separately on th	
	or the amendment(s) was/were sufficient for appro	nval
by	(voting group)	
,	(voting group)	
☐ The amendment(s) was/were ado- action was not required.	oted by the board of directors without shareholder	action and shareholder
☐ The amendment(s) was/were ado action was not required.	oted by the incorporators without shareholder actic	on and shareholder
Dated	9/30/19	
selected	rector, president or other officer – if directors or o , by an incorporator if the hands of a receiver, ed fiduciary by that fiduciary)	
	SI MING ZIN (Typed or printed name of person significant)	ng)
	PRESIDENT	

(Title of person signing)