P10000039409

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SEORETARY OF STATE WILLAHASSEE, FLORIOS

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	THE	FURNITUR	DISTRIBUTO	R OF	MIAMI	INC.
DOCUMENT NUMBER:	P100	000039409				
The enclosed Articles of Amenda	nent as	nd fee are subr	nitted for filing.	•		
Please return all correspondence	concer	ning this matte	r to the following	;		
MING C WA	ANG					
		(Name of Conta	ct Person)			-
MING C W	ANG,	CPA, PA	_			_
		(Firm/ Con	pany)			
6950 CYPE	RESS	RD STE 20				_
		(Addres	s)			
PLANTATIO	ON FI	33317				_
		(City/ State and	Zip Code)			_
For further information concerning	ng this	matter, please	call:			
MING C WA		a	t (<u>954</u>) <u>79</u>	1-206	51 Talankana	Normal and
(Name of Contact Perso	on)		(Area Code & D	aytime	i elepnone	Number)
Enclosed is a check for the follow	ving an	nount made pa	yable to the Floric	la Dep	artment o	f State:
X \$35 Filing Fee \$43.75 Fil Certificate	_		\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)		Cert Cert (Ad	.50 Filing Fee tificate of Status tified Copy ditional Copy enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		. D C	reet Address mendment Section ivision of Corpora lifton Building 661 Executive Cer	tions	rcle	

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

THE FURNITURE DISTRIBUTOR OF MIAMI INC.

(Name of Corporation as currently filed with the Florida Dept. of State)

P10000039409

(Document Number of Corporation (if known)

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

		•	
he new name must be distinguishable incorporated" or the abbreviation "Corp., Co". A professional corporation nat sociation," or the abbreviation "P.A."	" "Inc.," or Co.,	" or the designation '	'Corp," "Inc," or
. Enter new principal office address, if ap Principal office address MUST BE A STRE		211 NW 197TH	AVE.
rincipul office uddress <u>MOSI BE ASIRE</u>	<u>EI ADDRESS</u>)	PEMBROKE PINE	S, FL 33029
			
. Enter new mailing address, if applicab (Mailing address MAY BE A POST OFF		211 NW 197TH	AVE.
		PEMBROKE PINE	s, FL 33029
. If amending the registered agent and/or new registered agent and/or the new registered agent			ter the name of the
Name of New Registered Agent:	JAO, CHIH	-TE	
	211 NW 19	7TH AVE.	
New Registered Office Address:	(Floria	da street address)	_
	PEMBROKE	PINES	_, Florida <u>33029</u> (Zip Code)
		(City)	(Zip Code)
ew Registered Agent's Signature, if chang			
hereby accept the appointment as register	ed agent. I am f	amiliar with and accep	pt the obligations of
osition.	las a	hih-2	,
	Signature of New 1	Registered Agent, if cha	inging
×	Signature of New I	Pil - Z Registered Agent, if cha	nging

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	<u>Name</u>	Address	Type of Action
PD	JAO, CHIH-TE	211 NW 197TH AVE. PEMBROKE PINES FL 33029	Gx Add □ Remove
PD	JAO, CHIH-TE	8755 NW 35 LN DORAL FL 33172	□ Add ☑ Remove
SD	YEH, SHAW JEE	8755 NW 35 LN DORAL FL 33172	
	nding or adding additional Articles, and additional sheets, if necessary). (Be additional sheets, if necessary).		
provis	nmendment provides for an exchange sions for implementing the amendme inot applicable, indicate N/A)		
· · · · · · · · · · · · · · · · · · ·			<u> </u>

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)

<u>Title</u>	Name	Address	Type of Action
SD	CHENG, RUEY HSIUNG	8755 NW 35 LN DORAL FL 33172	Add D Remove
SD	YU, JIN YEN	8755 NW 35 LN DORAL FL 33172	Add Remove
SD	YU, STANLEY Y	8755 NW 35 LN DORAL FL 33172	Add X Remove
	ding or adding additional Articles, entended ditional sheets, if necessary). (Be spe		
	· · · · · · · · · · · · · · · · · · ·		
<u>provisi</u>	mendment provides for an exchange, rons for implementing the amendment in applicable, indicate N/A)		
			v

The date of each amendment(s	s) adoption: AUGUST 13, 2010
Effective date if applicable:	
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were by the shareholders was/wer	e adopted by the shareholders. The number of votes cast for the amendment(s) re sufficient for approval.
The amendment(s) was/were must be separately provided	e approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):
"The number of votes ca	ast for the amendment(s) was/were sufficient for approval
by	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
(voting group)
The amendment(s) was/were action was not required.	e adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder
DatedAUC	GUST 13, 2010
Signature <u>≺</u>	
select	director, president or other officer – if directors or officers have not been ted, by an incorporator – if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)
	JAO, CHIH-TE
	(Typed or printed name of person signing)
	PRESIDENT for Chil- 7
	(Title of newson signing)