P12000001217

(Re	equestor's Name)	- H-
(Ac	idress)	
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(Ci	ty/State/Zip/Phone	a #f\
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Illimon Optoelectronic Technology Co. DOCUMENT NUMBER: P12000001217					
The enclosed Articles of	f Amendment and fee are sul	bmitted for filing,			
Please return all corresp	ondence concerning this mat	ter to the following:			
_		Pu Li			
		Name of Contact Persor	l		
_		Pu Li CPA, P.C.			
_		Firm/ Company			
_	4112 W	Spring Creek P	kwy D100		
		Address			
_	F	Plano, TX 75035			
		City/ State and Zip Code			
	pulicp	a@sbcglobal.ne	et		
	E-mail address: (to be us	sed for future annual report	notification)		
For further information	concerning this matter, pleas	e call:			
Pu Li		at (972	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 Department of State:					
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
	ing Address	Street Address			
	idment Section ion of Corporations	Amendment Section Division of Corporations			
P.O. Box 6327 Clifton Building					
Talla	hassee, FL 32314	2661 Executive Center Circle			

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

Illimon Optoelectronic T	echnology Co.			
(Name of Corporation as P12000001217	currently filed with the Fl	orida Dept. of State)		
	nt Number of Corporation (if	known)		
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this /	. Floridu Profit Curporation adopts the follo	owing amenda	ment(s) to
A. If amending name, enter the new na	me of the corporation:	•		
	ation "Corp." "Inc." or "C	," "company," or "incorporated" or th o". A professional corporation name m P.A."		on
B. Enter new principal office address, if applicable:		1827 16th ST Unit 105		
(Principal office address MUST BE A S		Santa Monica		
		CA, 90404		
C. Enter new mailing address, if applicable; (Mailing address MAY BE A POST OFFICE BOX)		1827 16th ST Unit 105		
		Santa Monica		20
		CA, 90404	LANGE S	
D. If amending the registered agent an new registered agent and/or the new	d/or registered office addre v registered of fice address:	ess in Florida, enter the name of the	YRY (, <u> </u>
Name of New Registered Agent Reid Lee O'Bries		Johnson	F.S	₽ !! 5 :-
	5010 SE 4th Ave		DRIE F	
	(Horida stre	et address)	7r. C	Ø
New Registered Office Address:	Ocala , Florida 34480			
	(City)	(Zip Code)	
*	hanging Registered Agent: ered agent. I am familiar w Market Control ending the Registered A	ith and accept the obligations of the positi	on.	

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.

Example: X Change	<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	Name	Address		
1) Change	PT	Mark Qi	5010 SE 4th Ave		
Add			Ocala, FL 34480		
Remove					
2) Change	PT	Reid Lee O'Brien Johnson	1827 16th ST Unit 105		
Add			Santa Monica		
Remove			CA, 90404		
3) Change	_				
Add					
Remove					
4) Change					
Add					
Remove					
5) Change					
Add					
Remove					
6) Change					
Add					
Remove					

. If amending or adding additional Arti (Attach additional sheets, if necessary).	(Be specific)	zels) nere:			
I/A	, ,				
	 ,				
			<u> </u>		·-·-
-					
					
		<u></u>	<u> </u>		
					
				·	
If an amendment provides for an exch	ange, reclassific	ation, or can	cellation of i	sued shares.	
provisions for implementing the ame	ndment if not co	ntained in th	e amendmen	t itself:	
(if not applicable, indicate N/A)					
/A					
				····	
				·	
					·

The date of each amendment(s) add date this document was signed.	ption: 127222CO14	if other than the
Effective date if applicable: 1/1/2	2015	
Entervit date <u>in applicante.</u>	(no more than 90 days after amendment file date)	 -
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adop by the shareholders was/were suff	ted by the shareholders. The number of votes east for the amendment(s) leient for approval.	
	oved by the shareholders through voting groups. The following statement ach voting group entitled to vote separately on the amendment(s):	
"The number of votes east fo	or the amendment(s) was/were sufficient for approval	
by	No.	
	(voting group)	
Fhe amendment(s) was/were adopaction was not required.	ted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were adoptection was not required.	ted by the incorporators without shareholder action and shareholder	
Dated 12/22/20	14	
DatedSignature	nk Qi	
(By a dir	ector, president or other officer - it directors or officers have not been	
	by an incorporator - if in the hands of a receiver, trustee, or other court	
appointe	d fiduciary by that fiduciary)	
1	Mark Qi	
·	(Typed or printed name of person signing)	
1	President	
•••	(Title of person signing)	