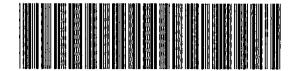
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Special Instructions to	Filing Officer:	
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13 AUG 12 AM 8: 24

SECRETARY OF STATE

VALLAHASSEE

C. LEWIS

AUG 1 4 2013

EXAMINER

COVER LETTER

Division of Corporations LEE N KWON, INC NAME OF CORPORATION: P13000039837 DOCUMENT NUMBER: __ The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Kang Chu Name of Contact Person Dongwan D Chong Accountancy Corp
Firm/ Company 3600 Wilshire Blvd. STE 2220 Los Angeles / CA / 90010 City/ State and Zip Code Kchu@dwccpa.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: **■**\$43.75 Filing Fee & □ \$35 Filing Fee □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy (Additional Copy enclosed) is enclosed)

Mailing Address

TO: Amendment Section

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to **Articles of Incorporation** \mathbf{of}

FILED 13 AUG 12 AM 8: 24 SECRETARY OF STATE TALLAHASSEE FLORIDA

LEE N KWON, INC

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

P13000039837

(Document Number of Corporation (if known)

ent(s) to

its Articles of Incorporation: A. If amending name, enter the new name of the corporation.	
	The newThe newThe newThe newThe newThe newThe new
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRE	<u></u>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1317 S olive St.
:	Los Angeles CA 90015
D. If amending the registered agent and/or registered new registered agent and/or the new registered off	
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	(City), Florida(Zip Code)
New Registered Agent's Signature, if changing Registe I hereby accept the appointment as registered agent. I a	ered Agent: m familiar with and accept the obligations of the position.
Signature of Man	Pagistored Agant 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 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 Jo	hn Doe	
X Remove	<u>V</u> <u>M</u>	ike Jones	
X Add	<u>SV</u> <u>Sa</u>	lly Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) <a>Change	<u>P</u>	Hea-Jin Jung	1317 S Olive St.
Add			Los Angeles, CA 90015
Remove			MINISTER STATE OF THE STATE OF
2) Change		Hea-Jin Jung	1317 S Olive St.
Add			Los Angeles, (A 90015
Remove			
3) / Change	T	Hea-Jin Jung	1317 S olive St.
Add			Los Angeles CA 90015
Remove			
4) Change	D	Hea-Jin Jung	1317 S Olive St.
Add			Los Angeles, CA 90015
Remove			
5) Change			***************************************
Add			MANUAL PROPERTY OF THE PARTY OF
Remove			
6) Change			
Add			
Remove			

amending or adding additional Artic tach additional sheets, if necessary).	(Be specific)
	
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an amendment provides for an exch	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
(if not applicable, indicate N/A)	nument is not contained in the amendment asen.

FILED

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SECRETARY OF STATE
ALLAHASSEE, FLORIDA

The date of each amendment(s) adop	tion:
date this document was signed.	TALLAHASSF
Effective date if applicable:	
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were adopt by the shareholders was/were suffi	d by the shareholders. The number of votes east for the amendment(s) ient for approval.
	red by the shareholders through voting groups. The following statement is the voting group entitled to vote separately on the amendment(s):
	the amendment(s) was/were sufficient for approval
by	(voting group)
,	(voning group)
☐ The amendment(s) was/were adopt action was not required.	d by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were adopt action was not required.	d by the incorporators without shareholder action and shareholder
Dated 8	2/13
Signature	
(By a dire selected	of the president or other officer – if directors or officers have not been an incorporator – if in the hands of a receiver, trustee, or other court fiduciary by that fiduciary)
	Sue Jin Lee
	Sue Jin Lee (Typed or printed name of person signing)
	Director
	(Title of person signing)