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T0: Amendment Section
Division of Corporations

NAME OF CORPORATION: Wilson-Zh	u Enterprises	s, Inc.
DOCUMENT NUMBER: P130001022	238	
The enclosed Articles of Amendment and fee are sub	omitted for filing.	
Please return all correspondence concerning this matt	ter to the following:	
Tracey Prever		
	Name of Contact Person	n
Wilson-Zhu Ent	, <u> </u>	
	Firm/ Company	
604 Nadina Pla	ice	
	Address	· · · · · · · · · · · · · · · · · · ·
Celebration, FL	34747	
	City/ State and Zip Cod	e
tracey@wilson-zh	u.com	
	ed for future annual report	notification)
For further information concerning this matter, please	e call:	
Tracey Prever	at (407	433-4778 de & Daytime Telephone Number
Name of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for the following amount made p	ayable to the Florida Depa	artment of State:
□ \$35 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Ameno Divisio Cliftor	Address Iment Section on of Corporations Building Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Wilson-Zhu Enterprises, In	C
	filed with the Florida Dept. of State)
P13000102238	
(Document Number o	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florid its Articles of Incorporation:	da Statutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the c	corporation:
	The new
name must be distinguishable and contain the wo "Corp.," "Inc.," or Co.," or the designation "Corp word "chartered," "professional Association," or the	ord "corporation," "company," or "incorporated" or the abbreviation p," "Inc," or "Co". A professional corporation name must contain the e abbreviation "P.A."
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET AD	
C. Enter new mailing address, if applicable:	
(Mailing address <u>MAY BE A POST OFFICE B</u>	<u> </u>
D. If amending the registered agent and/or registered new registered agent and/or the new registered	ered office address in Florida, enter the name of the doffice address:
Name of New Registered Agent	•
wante of New Negristered Agent	•
	(Florida street address)
New Registered Office Address:	. Florida
New negistered Office Address.	(City) (Zip Code)
New Registered Agent's Signature, if changing Re	egistered Agent:
т петеву ассері іне арронішені аз геуізіегей адені.	I am familiar with and accept the obligations of the position.
Signature of M	New Registered 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 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:	DT	John Dog	
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)	<u>Title</u>	Name	<u>Addres</u> s
1) Change		<u> </u>	
Add			
Remove			
2) Change			
[]			
Add			
Remove			
3) Change			
Add			
Remove			
[
4) Change		-	
Add			
Remove			
5) Change			
		-	
Add			
Remove			
6) Change			
			
Add			
Remove			

	necessary). (Be specific)		
				
	<u> </u>	·	····	
				
				
	## ***********************************			
				
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			··	
				
	 			
~				···
If an amendment provides	for an exchan	<u>ie, reclassification, c</u>	or cancellation of issued sh	ares.
provisions for implement (if not applicable, indi	ing the amendr	nent if not contained	in the amendment itself:	
mendment to Article IV	•			
				· _
) IV: Allocation of .333	/1000 share	s to Zhu Ting Yo	ong (EVP)	4
i) IV: Allocation of .333	3/1000 share	es to Jim Wilson	(CEO)	
ii) IV: Allocation of .33	3/1000 char	es to Tracey Pre	over (D)	
ii) IV. Allocation of .55		es to Tracey Fre	ever (F)	
	. <u> </u>			
				
<u></u>				

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by" (voting group)	
(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder	
action was not required.	
Dated 2 /19/2014	
me //m / Men	
Signature (By a director, president or other officer – if directors or officers have not been	
selected, by an incorporator if in the hands of a receiver, trustee, or other court	
appointed fiduciary by that fiduciary)	
Tracey Prever	
(Typed or printed name of person signing)	
President - Wilson-Zhu Enterprises	
(Title of person signing)	