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C. LEWIS APR 1 0 2014 EXAMINER

### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

Division of Corp	porations					
NAME OF CORPO	RATION: UPS WOR	LDWIDE, INC				
DOCUMENT NUMBER: P14000004679						
DOCUMENT NUM	BEK:					
The enclosed Articles	of Amendment and fee are sa	ibmitted for filing.				
Please return all corre	spondence concerning this ma	atter to the following:				
GUODONG QU						
	Name of Contact Person					
	Firm/ Company					
	13506 SUMMER	PORT VILLAGE	PKWY #288			
		Address	· · · · · · · · · · · · · · · · · · ·			
	WINDERMERE F	FL 34786				
		City/ State and Zip Cod	e			
ΙT	EWORLD@YAHC	OO COM				
	_	sed for future annual report	notification)			
	,	•				
For further information	n concerning this matter, plea	se call:				
GUODONG	OLI.	247	6547120			
		at ( <u>347</u>	0547136			
Name	of Contact Person	Area Co	de & Daytime Telephone Number			
Enclosed is a check for	or the following amount made	payable to the Florida Depa	urtment 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)			
Mailing Address		Street Address				
	endment Section		lment Section			
	ision of Corporations	Division of Corporations				
	. Box 6327 ahassee: FL 32314	Clifton Building 2661 Executive Center Circle				

Tallahassee. FL 32301

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SECRETARY OF STATE
TALL AHASSEE, FLORIDA

#### Articles of Amendment to Articles of Incorporation of

UPS WORLDWIDE INC	
(Name of Corporation as currently filed with the Florida Dept. of State)	
P14000004679	
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006. Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(sits Articles of Incorporation:	) to
A. If amending name, enter the new name of the corporation:	
WORLDWIDE GO, INC	
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
C. Fatara and Was address (for all all and the second seco	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
<del></del>	
D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:	
Name of New Registered Agent	
Name of New Regimerea Agent	
(Florida street address)	
New Registered Office Address:, Florida	
(City) (Zip Code)	
New Registered Agent's Signature, if changing Registered Agent:	
I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.	
Signature of 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: X Change	<u>PT</u>	<u>John De</u>	<u>oe</u>		
X Remove	<u>v</u>	Mike Jo	<u>mes</u>		
X Add	<u>sv</u>	Sally Si	nith		
Type of Action (Check One)	<u>Title</u>		<u>Name</u>		<u>Addres</u> s
1) Change		_		_	
Remove					
2) Change				 _	
Add Remove					
3) Change		_		 -	
Add Remove					
4) Change		<u> </u>		 	
Add Remove					
5) Change		<del></del>		 _ ,	
Add Remove					
6) Change					
Add		_		,	
Remove					

attach additional sheets. if necessary).	(Be specific)
· · · · · · · · · · · · · · · · · · ·	
** #BA	
an amendment provides for an exch:	ange, reclassification, or cancellation of issued shares,
rovisions for implementing the amer	idment if not contained in the amendment itself:
(if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
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SECRETARY OF STATE TALLAHASSEE, FLORIDA

The date of each amendment(s) ac	loption: March 20, 2014	TALLAHASSEE	, if other than the
date this document was signed.	•		<del></del> -
Effective date if applicable:			<u></u>
	(no more than 90 days t	after amendment file date)	
Adoption of Amendment(s)	( <u>CHECK ONE</u> )		
The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number flicient for approval.	er of votes east for the amendment(s)	
	roved by the shareholders through vo each voting group entitled to vote sep	ting groups. The following statement parately on the amendment(s):	
"The number of votes cast	for the amendment(s) was/were suffic	ient for approval	
by		**	
	(voting group)		
The amendment(s) was/were ado action was not required.	pted by the board of directors withou	t shareholder action and shareholder	
The amendment(s) was/were ado action was not required.	pted by the incorporators without sha	reholder action and shareholder	
Dated 03/20/20	)14		
Signature	ando	2	_
selected	rector, president of other officer — if a 1. by an incorporator — if in the hands ed fiduciary by that fiduciary)	directors or officers have not been of a receiver, trustee, or other court	
	Guodong Qu		
	(Typed or printed n	name of person signing)	
	President		
	(Title of pe	rson signing)	_