P14000005633

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Amendicus

OCT 16 2015 I ALBRITTON



COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: RU JIA TRADINO	GINC	
DOCUMENT NUM	P1400005633		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	ANGELINA C. LI		
		Name of Contact Persor	1
	JAL ACCOUNTING, P.A.		
		Firm/ Company	
	3363 SHERIDAN STREET S	STE 214	
		Address	-
	HOLLYWOOD, FL 33021		
		City/ State and Zip Code	e
ANG	EL@JALACCOUNTING.CO	0M	
	E-mail address: (to be us	sed for future annual report	notification)
For further informatio	n concerning this matter, pleas	e call:	
MEI HUA LI		at (963-6606
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	r the following amount made	payable to the Florida Depa	artment 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)
Am Div P.O	iling Address endment Section ision of Corporations Box 6327 ahassee, FL 32314	Amend Divisio Clifton	Address Iment Section on of Corporations Building executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

RU JIA TRADING INC		<u> </u>		
(Name o	of Corporation as curren	tly filed with the Florida [Dept. of State)	
P14000005633				
	(Document Number	of Corporation (if known)		
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, thi	s Florida Profit Corporatio	n adopts the following amenda	ment(s) to
A. If amending name, enter the new na	me of the corporation:			
NONE			The n	osu:
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "charlered," "professional associa	ation "Corp," "Inc," or	"Co". A professional corp "P.A."	orporated" or the abbreviati	on
B. Enter new principal office address,	if applicable:	NONE		_
(Principal office address MUST BE A S			75.25 12.25 12.25	
			S OCT 1	<u> </u>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		NONE	55 5 5 5 5 5 5 5 5 5 	- m
			753	\cup
			29 REF 29	-
	•	·	3	-
D. If amending the registered agent an	d/or registered office ad	dress in Florida, enter the	name of the	
new registered agent and/or the new				
Name of New Registered Agent	MEI HUA LI			
	1264 BEACON CIR			
	(Florida s	street address)		
New Registered Office Address:	WELLINGTON		, Florida 33414	
<u>New Regisierea Office Address:</u>		(City)	(Zip Code)	_
New Registered Agent's Signature, if c	hanging Registered Agei	nt:		
I hereby accept the appointment as regist	tered agent. I am familia	r with and accept the obliga	utions 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>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	PDST	JILING CHEN	17783 SW 47TH STREET
Add X Remove			MIRAMAR, FL 33029
2) Change	PDST	MEI HUA LI	1264 BEACON CIR
X Add			WELLINGTON, FL 33414
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			· <u></u>
Add			
Remove			
6) Change			
Add			
Remove			

	y). (Be specific)		
NONE		. <u></u>	
			
			
			 .
			-
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		·	
		<u> </u>	
F. If an amendment provides for an o	exchange, reclassification, o	r cancellation of issued sha	res,
provisions for implementing the	mendment if not contained	l in the amendment itself:	
(if not applicable, indicate N/A	,		
NONE		<u> </u>	
			

OCT 1, 2015	
The date of each amendment(s) adoption:	, if other than the
OCT 1, 2015	
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, the document's effective date on the Department of State's records.	is date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment by the shareholders was/were sufficient for approval.	nent(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following stamust 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 share action was not required.	holder
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	ег
OCT 6TH, 2015 Dated	
Signature 🕖 🔎	
(By a director, president or other officer – if directors or officers have not be selected, by an incorporator – if in the hands of a receiver, trustee, or other appointed fiduciary by that fiduciary)	court
MEI HUA LI	
(Typed or printed name of person signing)	
PRESIDENT.	

(Title of person signing)