

P14000036162

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

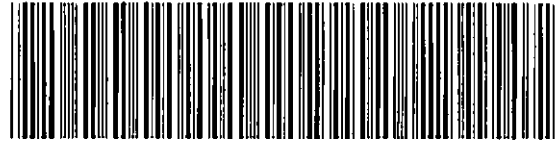
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

J. HORNE
MAY 28 2024

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300429642853

FILED
2024 MAY 24 AM 10:13
TALLAHASSEE, FLORIDA

RECEIVED
2024 MAY 24 PM 4:02
TALLAHASSEE, FLORIDA

FLORIDA CAPITAL COURIER SERVICES, INC
2330 CLARE DRIVE
TALLAHASSEE, FL 32309
(850) 524-5437
(850) 524-624

Please use funds from this account: 12021000160: \$ 52.50

Authorization Signature: [Signature]
Lee Shan Properties, INC. P14000036162

Business

Document #

☐ Walk in

☐ Pick up time

☐ Mail out

☐ Will wait

☒ Certified copy of articles

☒ Certificate of Status

NEW FILINGS

☐ Profit
☐ Not for Profit
☐ Limited Liability
☐ Domestication
☐ Other
☒ **CORP**

OTHER FILINGS

☐ Annual Report

☐ Fictitious Name

☐ APOSTIL
Country

AMMENDMENTS

☒ Amendment
☐ Resignation of R.A. Officer/Director
☐ Change of Registered Agent
☐ Dissolution/Withdrawal
☐ Merger
☐ Conversion

REGISTRATION/QUALIFICATIONS

☐ Foreign filing
☐ Limited Partnership
☐ Reinstatement

☐ Other

EXAMINER'S INITIALS:

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☐ Other

EXAMINER'S INITIALS: _____

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: LEE SHAN PROPERTIES, INC.

DOCUMENT NUMBER: P14000036162

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

THOMAS M. DRYDEN, ESQ.

Name of Contact Person

THOMAS M. DRYDEN, P.L.

Firm/ Company

1705 COLONIAL BOULEVARD, SUITE B-3

Address

FORT MYERS, FL 33907

City/ State and Zip Code

tom@thomasdrydenlaw.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

THOMAS M. DRYDEN, ESQ.

at (239) 337-2001

Name of Contact Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

- | | | | |
|--|--|---|---|
| <input type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input checked="" type="checkbox"/> \$52.50 Filing Fee
Certificate of Status
Certified Copy
(Additional Copy
is enclosed) |
|--|--|---|---|

Mailing Address

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

Street Address

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Amendment
to
Articles of Incorporation
of

LEE SHAN PROPERTIES, INC.

FILED
2024 MAY 24 AM 10:12

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

P14000036162

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

The new 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. Enter new mailing address, if applicable:
(Mailing address **MAY BE A POST OFFICE BOX**)

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 TOMMY LEE

17240 S. Tamiami Trail, Suite 07

(Florida street address)

New Registered Office Address: Fort Myers, FL 33908-4573

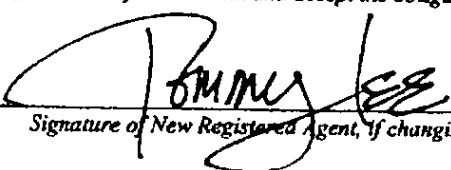
(City)

Florida

(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

Check if applicable

☒ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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:

☒ Change PT John Doe

☒ Remove V Mike Jones

☒ Add SV Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <input type="checkbox"/> Change	D, P	CHAU PING TOM	17240 S. Tamiami Trail, Suite 07
<input type="checkbox"/> Add			Fort Myers, FL 33908-4573
<input checked="" type="checkbox"/> Remove			
2) <input type="checkbox"/> Change	D, VP	TOMMY LEE	17240 S. Tamiami Trail, Suite 07
<input type="checkbox"/> Add			Fort Myers, FL 33908-4573
<input checked="" type="checkbox"/> Remove			
3) <input type="checkbox"/> Change	D, P, T	TOMMY LEE	17240 S. Tamiami Trail, Suite 07
<input checked="" type="checkbox"/> Add			Fort Myers, FL 33908-4573
<input type="checkbox"/> Remove			
4) <input type="checkbox"/> Change	D	PHILLIP LEE	17240 S. Tamiami Trail, Suite 07
<input type="checkbox"/> Add			Fort Myers, FL 33908-4573
<input checked="" type="checkbox"/> Remove			
5) <input type="checkbox"/> Change	D, VP, S	PHILLIP LEE	17240 S. Tamiami Trail, Suite 07
<input checked="" type="checkbox"/> Add			Fort Myers, FL 33908-4573
<input type="checkbox"/> Remove			
6) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			

This image shows a single sheet of white paper with horizontal blue or grey ruling lines. The lines are evenly spaced and run across the width of the page. There is no handwriting or other markings on the paper.

[illegible]

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)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s) (CHECK ONE)

- ☐ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.
- ☒ 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)

Dated

19. MAY. 2024

Signature

Chau Ping Tom Tommy Lee
(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)

CHAU PING TOM

TOMMY LEE

(Typed or printed name of person signing)

DIRECTOR, PRESIDENT

DIRECTOR, PRESIDENT

(Title of person signing)