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AUG 11 2017

I ALBRITTON

COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

, ĝ

NAME OF CORPORA	ATION: Yong Xii	ng Garden Inc	
DOCUMENT NUMBE	:r: <u>P15000<i>0</i>056</u>	80	
The enclosed Articles of	Amendment and fee are su	bmitted for filing.	
Please return all corresp	ondence concerning this ma	tter to the following:	
_	Guil	Viang Lin Wame of Contact Person	
	_ ,	Wame of Contact Person	1
	Ch	inese Garden	
-		Firm/ Company	
_	4595 H	Address North Florida City/ State and Zip Cod	Ste 9
	Lake u	North Florida	. 33463
		City/ State and Zip Cod	e
	Linguoj	on 2606 @ Gmail.	Com
	E-mail address: (to be us	sed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
Guil	ang lin	an (<u>561</u>	373-4108
Name of	Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	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)
<u>Maili</u>	ng Address		Address
	dment Section		Iment Section
Division of Corporations P.O. Box 6327		Division of Corporations Clifton Building	
	30x 0327 nassee, FL 32314		Executive Center Circle

Tallahassee, FL 32301

Articles	s of Amendment
Articles	of Incorporation
\/ \/ \/ \/	of Test
Yong Xing G	varden inc
	rrently filed with the Florida Dept. of State)
1/150000	
(Document Num	nber of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes its Articles of Incorporation:	s, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation	on:
	The new oration," "company," or "incorporated" or the abbreviation or "Co". A professional corporation name must contain the ation "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 new registered agent and/or the new registered office ad	ddress:
Name of New Registered Agent 4595	Hypoloxo Road STE 9
·	NOCH
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered A l hereby accept the appointment as registered agent. I am fam	
Emi Ling	
Signature of I	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</u>	<u> Doe</u>	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
X Add	SV Sally	y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	P	Yvan Ci Zhang	4595 Hypoloxo Rd Steg Lake worth, FL, 33413
Add Remove			<u>Lake worth</u> , FL, 33463
2) Change Add	<u>VP</u>	Guiliang Lin	4595 Hypoloxo Rd Steg Lake worth, FL, 33463
Remove 3) Change Add	<u> </u>	Guiliang Lin	4595 Hypoluxo Rd Steg lake Worth, FL, 53463
Remove 4) Change Add			
Remove 5) Change Add			
Remove 6) Change Add			
Remove			

	(Be specific)
	
	/
f an amendment provides for an excl	hange, reclassification, or cancellation of issued shares,
	endment it not contained in the amendment itself;
provisions for implementing the ame (if not applicable, indicate N/A)	
provisions for implementing the ame (if not applicable, indicate N/A)	
provisions for implementing the ame (if not applicable, indicate N/A)	
provisions for implementing the ame (if not applicable, indicate N/A)	
provisions for implementing the ame (if not applicable, indicate N/A)	
provisions for implementing the ame (if not applicable, indicate N/A)	
provisions for implementing the ame (if not applicable, indicate N/A)	

The date of each amendment(s) adoptate this document was signed.	ion:	1 2017	, if other than the
Effective date <u>if applicable</u> :	08 /04 / 20 1 5 (no more than 90) days af	fter amendment file date)	
Note: If the date inserted in this block document's effective date on the Depart		autory filing requirements, this date	will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)		
☐ The amendment(s) was/were adopte by the shareholders was/were suffic		of votes cast for the amendment(s)	
☐ The amendment(s) was/were approvemust be separately provided for each			ı
"The number of votes cast for	the amendment(s) was/were sufficie	ent for approval	
by			
	(voting group)		
☐ The amendment(s) was/were adopte action was not required.	d by the board of directors without s	shareholder action and shareholder	
The amendment(s) was/were adopte action was not required.	d by the incorporators without share	eholder action and shareholder	
Dated 08/	04/2017		
Signature	Librar Li		
(By a direct selected, b	tor, president or other officer – if di y an incorporator – if in the hands o fiduciary by that fiduciary)		
архописа	Guiliang	Lin	
	(Typed or printed name of p		
	Vice P	resident.	

(Title of person signing)