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10/28/2019



Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : LAW OFFICES TONY PORNPRINYA

Account Number : 120010000164 Phone : (305)893-8989 : (305)891-7717 Fax Number

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

| Email | Address: | |
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COR AMND/RESTATE/CORRECT OR O/D RESIGN 119 CHINA TOWN INC.

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Electronic Filing Menu

Corporate Filing Menu

Help

COVER LETTER

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| | | COVER LETTER | | |
| TO: Amendment Sect Division of Corpo | | | | Elle Control of the C |
| NAME OF CORPOR | RATION: 119 CHINA TOW | 'N INC. | | 7. 7. 7. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. |
| DOCUMENT NUME | | | | |
| | of Amendment and fee are si | | | |
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| | | to me some sime. | | |
| | TONY PORNPRINYA | on the graph property commences and the first place of the graph of th | | |
| | | Name of Contact Perso | 90 | |
| | LAW OFFICE OF TONY P | | | |
| • | | Firm' Company | | |
| | 1555 NE 123 STREET | | | |
| | وغيريها الشاهية والمتافقة والتناف فللما فالمساء فللما فالمادة والمساورة المساورة والمساورة والمساورة | Address | | |
| | NORTH MIAMI FL 33161 | | | |
| • | | City/ State and Zip Coc | le | |
| NVC | @MIAMIDADELAW,NET | | | |
| | | sed for future annual report | t notification) | |
| | , | , | , | |
| For further information | concerning this matter, plea- | se call; | | |
| TONY PORNPRINY | 4 | .ar (| _{-:} 893-8989 | |
| Name o | f Contact Person | Area Cu | ode & Daytime Telephone Number | |
| Enclosed is a check for | the following amount made | payable to the Florida Dep | artment of State: | |
| \$35 Filing Fee | Certificate of Status | ☐ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | ☐\$52.50 Fitting Fee Certificate of Status Certified Copy (Additional Copy is enclosed) | |
| Amer Divis P.O. | ing Address ndment Section ion of Corporations Box 6327 hassee, FL 32314 | Ameno Divisio Cliftor | Address Iment Section on of Corporations on Building Executive Center Circle | |

Tallahassee, FL 32301

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Articles of Amendment

| {((H13000318148 3})} | | | |
|--|--|--|---------|
| , | Articles of / | Amendment | , |
| | | to Samuelan | • |
| | | acorporation of San | V. |
| 119 CHINA TOWN INC. | , | neorporation of its filed with the Florida Dept. of State) | 14 |
| (Name | of Corporation as current | itly filed with the Florida Dept. of State) | ¥ |
| P15000627155 | | | |
| 1100000 | (Doormant Number) | of Corporation (if known) | ام م |
| | (Document Ranner) | of Corporation (if Known) | |
| Pursuant to the previsions of section 607, its Articles of Incorporation: | 1006, Florida Statutes, this | is Florida Profit Corporation adopts the following umenoment(s) to | |
| A. If amending name, enter the new na | ame of the corporation: | | |
| | | | |
| | . t. O | The new | |
| "Corn" "Inc." or Co." or the design | iain ine mora "corporaa ianon "Corp." "inc." or | tion," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the | |
| word "chartered," "professional associa | aion," or the abbreviation | t "P.A." | |
| no en la companya de | :A E b I | 715 NW 119 STREET, | |
| B. Enter new principal office address, (Principal office address MUST BE A S | | NICHTORNE ALT A BATE 111 1/101 CO | |
| · · · · · · · · · · · · · · · · · · · | , | NORTH MIAMI FL 33168 | |
| | | · | |
| | | | |
| C. Enter new mailing address, if appli | icable: | 715 NW 119 STREET | |
| (Muiling address MAY BE A POST | <u>office Box</u>) | | |
| | | NORTH MIAMI FL 33168 | |
| | | | |
| | | | |
| D. If amending the registered agent an | id/or registered office add | ldress in Florida, enter the name of the | |
| new registered upont und/or the ne- | | | |
| Name of New Registered Agent | CAM TRUONG HOAN | iG | |
| Same of New Registered Agent | 12308 NW 7 AVE | | |
| | | | |
| | | street address) | |
| New Registered Office Address: | NORTH MIAMI | , Florida 33100 | |
| | | (City) (Zip Code) | |
| | | | |
| | | | |
| New Registered Agent's Signature, if c | hanging Registered Agen | nt: | |
| I hereby accept the appointment as regist | ered ogent, - Lam fomiliat | r with and accept the obligations of the position. | |
| | تر: | 1 | |
| | a a f | Registered Agent, if changing | |
| | Secretary of Man | Penistered Agent if changing | |
| | minerale altagn | negurerou ngem, g conagraf | |

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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 Citange | <u> PT</u> | John Dop | |
|-------------------------------|---------------|------------------|--|
| X Remove | <u>Y</u> | Mike Jones | |
| X Add | <u>sy</u> | Sally Smith | |
| Type of Action (Check One) | Title | Name | <u>Addres</u> s |
| 1) Change | P | KE YU WANG | 3911 TREE TOP DR |
| Add X Remove | | | WESTON FL 33332 |
| 2) Change | P | CAM TRUONG HOANG | 12308 NW 7 AVE |
| X Add | | | NORTH MIAMI FL 33168 |
| Remove | | | *************************************** |
| 5) Change | | | |
| Add | | | |
| Remove | | | the same of the sa |
| 4) Change | ************* | | |
| Add | | | and the states of the states o |
| Remove | | | |
| 5) Change | | | - · · · · · · · · · · · · · · · · · · · |
| Add | | | |
| Remove | | | |
| 6) Change | | | |
| Add | | | |
| Remove | | | |

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| f.au smendment provides for an exchaprovisions for implementing the amen (if not applicable, indicate N/A) | ange, reclassification, or cancellation of issued shares, idment if not contained in the amendment itself: |
| provisions for implementing the amen | ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself: |
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|--|
| The date of each unendment(s) adoption: |
| Effective date if applicable: |
| 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 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 east for the amendment(s) was/were sufficient for approval |
| by |
| (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. |
| October 24, 2019 |
| Signature And ANONIC |
| (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) |
| Carn Hoang |
| (Typed or printed name of person signing) |
| President |
| (Title of person signing) |

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