P15000074966

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SECRETARY OF STATE

COVER LETTER

TO: Amendment Section

Division of Corporations EAGLE TV NETWORK CO. NAME OF CORPORATION: P15000074966 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: **CYNTHIA OUYANG** Name of Contact Person ZHANG & ASSOCIATES CPA PA Firm/ Company 1300 NE 191ST ST, #311 Address MIAMI, FL 33179 City/ State and Zip Code CYNTHIA.OUYANG@YMAIL.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: CYNTHIA OUYANG 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: \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) **Mailing Address Street Address** Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

Articles of Amendment to Articles of Incorporation of

EAGLE TV NETWORK CO.

(Name o	of Corporation as curren	tly filed with the Florida Dept. of State)	
	P15000074966		
	(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, this	s Florida Profit Corporation adopts the follow	ring amendment(s) to
A. If amending name, enter the new na	ame of the corporation:		
			The new
"Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp," "Inc," or	on," "company," or "incorporated" or the "Co". A professional corporation name mu. "P.A."	appreviation st contain the
B. Enter new principal office address, if applicable:		4595 NORTHLAKE BLVD STE 106	TAE 2
(Principal office address <u>MUST BE A S</u>	(Principal office address <u>MUST BE A STREET ADDRESS</u>)		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			-6 -6
		4595 NORTHLAKE BLVD STE 106	AH 6: 0F 3TF
		PALM BEACH GARDEN, FL 33418	##5 50
D. If amending the registered agent an new registered agent and/or the ne	d/or registered office ad w registered office addre	dress in Florida, enter the name of the ss:	
Name of New Registered Agent	YANG, LI J		
	4595 NORTHLAKE BL	VD STE 106	
	(Florida s	treet address)	_
New Registered Office Address:	PALM BEACH GARDEN . Florid		3
		(City) (Z	ip Code)
Non-Builde IA (1 Ct)			
New Registered Agent's Signature, if c I hereby accept the appointment as regist		u: · with and accept the obligations of the positio.	n.
	,		
		<i>y</i>	<u></u>
	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 <math>PTD.

Changes should be noted in the following manner. Currently John Doc 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>J</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>	Address
1) X Change	PD	LI J YANG	3189 HAMBLIN WAY
Add			WELLINGTON, FL 33414
Remove			
2) Change	D	HONG KOU	2253 SHOMA DRIVE
X Add			ROYAL PALM BEACH
Remove			FL 33414
3) Change	***	-	
Add			
Remove			
4) Change			
Add			
Remove			
5) Change		***	
Add			
Remove			-
6) Change			
Add	<u> </u>		
Remove			

ittach additional si	ding additional Artic heets, if necessary).	(Be specific)	<u> </u>		
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<u>provisions for im</u>	provides for an exchaplementing the amenable, indicate N/A)	ange, reclassificand ment if not con	<u>ition, or cancellat</u> itained in the ame	ion of issued share endment itself:	es,
	, , , , , , , , , , , , , , , , , , , ,		-		
		-			

	, if other than the
date this document was signed. '05/31/2016 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 dedocument's effective date on the Department of State's records.	ate 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.	s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statem must be separately provided for each voting group entitled to vote separately on the amendment(s):	ent
"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 sharehold action was not required.	er
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
05/31/2016	
Dated	
Signature	
(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 cou appointed fiduciary by that fiduciary)	
LI J YANG	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	