P15000102306

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A. Butter

COVER LETTER

TO: Amendment Section

Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

NAME OF CORPORATION: LANGT INC P15000102306. DOCUMENT NUMBER: _____ The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: PATEICIA POLLAR!

Name of Contact Person MOVANGE FINANCIAL STEVICE
Firm/ Company 3924 GRAL RIDGE DRIVE Address CORM SPENGS, FL 33065

City/ State and Zip Code E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Patricia Pollari at (954) 255-3848

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 Certified Copy (Additional copy is enclosed) (Additional Copy is enclosed) **Mailing Address** Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations

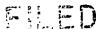
The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

Articles of Amendment to Articles of Incorporation

of



A The Control of the
(Name of Corporation as currently filed with the Florida Mepthof State) PH12: 49
(Name of Corporation as currently filed with the Florida Depth of State) Pil 12: 49
1 15 0 00 1 0 2 3 0 Q 31 STEET OF STATE
P 15000 102306 STATE (Document Number of Corporation (if known) WALL MANY SEE, FL.
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s ts 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
(Florida street address)
New Registered Office Address:, Florida
(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent:
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
Signature of the 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.

X Change	PT John	<u>Doe</u>	
X Remove	<u>V</u> <u>Mike</u>	Jones	
X Add	SV Sally	Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	VP	TRUNG NGUYEN	DECETIEND BEACH FZ 3344
Add Remove			DECETIEND BEACH FZ 3344
2) Change			
Add			<u> </u>
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change		 	
Add			
Remove			
6) Change			
Add			
Remove			

tach <i>additional sh</i>	heets, if necessary). (Be specific)
	<u> </u>
	
ovisions for imp	provides for an exchange, reclassification, or cancellation of issued shares, plementing the amendment if not contained in the amendment itself:
(if not applical	ble, indicate N/A)
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	ch amendment(s) ent was signed.	adoption:	, if other than th
Effective date	if applicable:		
		(no more than 90 days after amendment file date)	
		block does not meet the applicable statutory filing requirements, this date Department of State's records.	will not be listed as t
Adoption of A	mendment(s)	(CHECK ONE)	
☐ The amendm	• •	dopted by the incorporators, or board of directors without shareholder action	and shareholder
		dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
must be sep	arately provided fo	pproved by the shareholders through voting groups. The following statemen or each voting group entitled to vote separately on the amendment(s): st for the amendment(s) was/were sufficient for approval	f
		• • • • • • • • • • • • • • • • • • • •	
by		(voting group)	
	Dated	5/11/2021 Mu	
	Signature	director, president or other officer - if directors or officers have not been	
	select	ed, by an incorporator – if in the hands of a receiver, trustee, or other court need fiduciary by that fiduciary)	
		Typed or printed name of person signing)	
		(Typed or printed name of person signing)	
		(Title of person signing)	
		(Title of person signing)	