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2016 FEB 22 PM 3: 14
SECRETARY OF STATE

FEB 2 4 2016 C. CARROTHERS

## **COVER LETTER**

TO: Amendment Section Division of Corpo			
NAME OF CORPOR		Z SWFL	INC.
DOCUMENT NUMB	ER: Y 16 000	0006748	
The enclosed Articles of	of Amendment and fee are su	bmitted for filing.	
Please return all corresp	pondence concerning this ma	tter to the following:	
-	SI	han Qing Name of Contach Person	wang
_	EAST 1	RED SERVI	CES INC.
-	5164	Firm/ Company W. Colonia	1 Drive
-	Orla	Address FL City/ State and Zip Cod-	32808
	EAST R E-mail address: (to be us	ED @ BELL! sed for future annual report	SOUTH. NET
For further information	concerning this matter, pleas	se cail:	
Shan Q	ing Wang	at ( 40	1 415-8299
Name o	f 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)
	ing Address adment Section		Address Iment Section

Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle

## Articles of Amendment to Articles of Incorporation of

J K Z SWFL INC	
(Name of Corporation as curren	tly filed with the Florida Dept. of State)
<u></u>	
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this tits Articles of Incorporation:	s Florida Profit Corporation adopts the following amendments
A. If amending name, enter the new name of the corporation:	
N/A	The new =
name must be distinguishable and contain the word "corporate "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or word "chartered," "professional association," or the abbreviation  B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)  C. Enter new mailing address, if applicable:	"P.A."  4152 Tamiami Trail N  Naples FL 34/03
D. If amending the registered agent and/or registered office adenew registered agent and/or the new registered office address	
Name of New Registered Agent	N/A
(Florida s.	treet address)
New Registered Office Address:	(City) , Florida(City)
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familiar	<u>t:</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 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:	e, ana sa	uy Smun, Sv as an Aaa.	
X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) X Change	<u> P</u>	CHEN, Bao P	1442 Ashdown Ct. Santord, FL 32771
Add			Sanford, FL 32771
Remove			*
2) Change	P	ZHANG, Jian	1109 N. Alhambra Cir
Add			Naples, FL 34103
Remove			
3) Change			
Add		,	
Remove			
4) Change			
Add			
Remove			
5) Change	<del></del>		
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Arti (Attach additional sheets, if necessary).	ticles, enter change(s) here: (Be specific)
N/A	
	•
If an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
N/A	
· · · · · · · · · · · · · · · · · · ·	

	if other than the
date this document was signed.	
Effective date if applicable: 02/20/16  (no more than 90 days after amendment file date)	<u></u>
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not document's effective date on the Department of State's records.	t 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(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)	
☐ 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.	
Dated $02 - 15 - 16$	
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 court	
appointed fiduciary by that fiduciary)	
(Typed or printed name of person signing)	
President (Title of person signing)	