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COVER LETTER

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		COVER LETTER		- Carrie
TO: Amendment Section Division of Corporation				* ***********************************
NAME OF CORPOR	LATION: Durian	Darian INC		4 90
DOCUMENT NUME	BER: P 16	00000 9932		
The enclosed Articles	of Amendaient and fee are su	bmitted for filing.		V
Please return all corres	pondence concerning this ma	tter to the following:	·	
		YOON FUN CH		
		Name of Contact Perso	_ 1	•
	Duitan [)unan Asian	Than Chigne	
		Firm/ Company		
	10743 Narcos	8000 Rd . &	rite A 20	
		Address		•
	Orlando FL	37837		
•	144	City/ State and Zip Cod	e	
	duina.	Signthania.	amail. Com	
	E-mail address: (to be us	sed for future annual report		
For further information	concerning this matter, please	se call:		
,	Youn Fan (HIN'	· And	, 28, 2992	
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	☐\$52.50 Filing Fee Certificate of Status Certified Copy	
	·	enclosed)	(Additional Copy is enclosed)	
Mail	ing Address	Street	Address	
Ame	ndment Section	Amend	ment Section	
	ion of Corporations		n of Corporations	
	Box 6327 hassee, FL 32314		Building xecutive Center Circle	

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

Duitan Duitan

INC

(Name of Corporation as currently filed with the Florida Dept. of State)

P 600000 9932

•	(Document Namoer of Corporation (it known)	
Pursuant to the provisions of section 607.10 its Articles of Incorporation:	006, Florida Statutes, this Florida Profit Corporation adopts the following ame	endment(
A. If amending name, enter the new nam	ne of the corporation:	
	The	new
name must be distinguishable and contai "Corp.," "Inc.," or Co.," or the designat word "chartered," "professional association	in the word "corporation," "company," or "incorporated" or the abbrevion "Corp," "Inc," or "Co". A professional corporation name must conta on," or the abbreviation "P.A."	iation iin the
B. Enter new principal office address, if (Principal office address MUST BE A STR		
C. Enter new mailing address, if applica	able:	
(Mailing address MAY BE A POST OF		
D. If amending the registered agent and/ new registered agent and/ov the new t	or registered office address in Florida, enter the name of the registered office address:	
Name of New Registered Agent	CHONG: TAM:	
New Registered Office Address:	(Florida street address) [2160] (APLOCK DR , Florida 3) (City) (Zip Code)	1837
New Registered Agent's Signature, if cha I hereby accept the appointment as register	anging Registered Agent: red agent. I am familiar with and accept the obligations of the position.	
	Ectable Jallo	
	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.

X Change	<u>PT</u> <u>Joh</u>	<u>ın Doe</u>	
X Remove	<u>V</u> <u>Mil</u>	ke Jones	•
<u>X</u> Add	SV Sal	ly Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
i) Change	P	Your Few (HIN	9237 Walnut Gost
Add			Dr., Orlando A
Kemove			32832.
2) Change	<u>P</u>	LUONG LAM	12607 CAPLOCK DR
Add			ORLANDO IL 3282
Remove			
3) Change			
Add			·
Remove			
4) Change			
Add			
Remove			
5) Change			
Add	:		
Remove			
6) Change			
Add			
Remove			

f amending or adding additional Art Attach additional sheets, if necessary).	<u>ticles, enter change(s) here</u> : . (Be specific)
11	•
<u> </u>	
an amendment provides for an exc provisions for implementing the amo	change, reclassification, or cancellation of issued shares, tendment if not contained in the amendment itself:
(if not applicable, indicate N/A)	ı
	N/A
·	

•	213116	
The date of each amendment(s) adoption:	3757.0	, if other than the
date this document was signed.	7 1 . i .	
Effective date if applicable:	8/6/16	
	o more than 90 days after amendmen	t file date)
Note: If the date inserted in this block does not n document's effective date on the Department of State		quirements, this date will not be listed as the
Adoption of Amendment(s) (CHEC	K ONE)	
The amendment(s) was/were adopted by the shar by the shareholders was/were sufficient for appropriate the shareholders was/were sufficient for approximately the shareholders.	reholders. The number of votes cast for oval.	or the amendment(s)
The amendment(s) was/were approved by the sha must be separately provided for each voting gro	archolders through voting groups. The coup entitled to vote separately on the coup entitled to vote separately entitled to the coup entit	e following statement amendment(s):
"The number of votes cast for the amendment	ent(s) was/were sufficient for approva	ıl
by(voting g		U
(voting)	group)	_
☐ The amendment(s) was/were adopted by the boar action was not required.		tion and shareholder
The amendment(s) was/were adopted by the inco action was not required.	rporators without shareholder action	and shareholder
Dated	116	
Signature	cupile fath	,
	t or other officer - if directors or office	
	rator - if in the hands of a receiver, tr	ustee, or other court
appointed fiduciary by t	that fiduciary)	
<u></u>	CUONES LA	HPM
(Тур	ed or printed name of person signing)	
<u></u>	President	
	(Title of person signing)	