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18 APR 12 PH 3: 10

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: XING YUN FAM	MILY INC
DOCUMENT NUMBER: P16000033830	
The enclosed Articles of Amendment and fee are s	submitted for filing.
Please return all correspondence concerning this m	natter to the following:
ANDY B LAI, CPA	
	Name of Contact Person
LAI & COMPANY CPA, F	
	Firm/ Company
7850 ULMERTON ROAD,	SUITE 7A
	Address
LARGO, FL 33771	
	City/ State and Zip Code
ANDYLAI@LAICOCPA.COM	
E-mail address: (to be	used for future annual report notification)
For further information concerning this matter, please.  ANDY B LAI, CPA	
	at ( 727 ) 592-0678
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 \$\sum \text{Certificate of Status}\$	□\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy (Additional copy is enclosed)  □\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to

Articles of Incorporation of 18 APR 12 PM 3: 10

XING YUN FAMILY INC	・ ・ ・ ・ ・ ・ ・ ・ ・ ・ ・ ・ ・ ・ ・ ・ ・ ・ ・
(Name of Corporation	as currently filed with the Florida Dept. of State)
P16000033830	
(Documen	nt Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida State Articles of Incorporation:	tatutes, this Florida Profit Corporation adopts the following amendment(s)
. If amending name, enter the new name of the corp	oration:
	The new
	"corporation," "company," or "incorporated" or the abbreviation "Inc," or "Co". A professional corporation name must contain the
3. Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDRI</u>	ESS )
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered new registered agent and/or the new registered off	
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	_ , Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registon hereby accept the appointment as registered agent. I as	ered Agent: un familiar with and accept the obligations of the position.
Signatu	re 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: X Change	<u>PT</u> <u>John</u>	<u>ı Doe</u>	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
_X Add	<u>SV</u> <u>Sall</u>	y <u>Smith</u>	•
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	p	Zhao, Shu Wen	7749 ULMERTON ROAD
Add			TAMPA, FL 33771
X Remove			
2) Change	<u>_P,</u> S	zheng, Dong yu	7749 Ulmerton Rua
Add		<i>y v y</i>	Tompa, FL 3377/
Remove			
3)Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
71.17.18	
f an amendment provides for an eych	nange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	

	03/03/2018	
The date of each amendment(s) addate this document was signed.	option:	, if other than the
<del>_</del>	3/2018	
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bl document's effective date on the Dep	ock does not meet the applicable statutory filing requirements, this coartment of State's records.	late will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adop by the shareholders was/were suf	oted by the shareholders. The number of votes cast for the amendment ficient for approval.	(s)
	roved by the shareholders through voting groups. The following states each voting group entitled to vote separately on the amendment(s):	nent
"The number of votes cast f	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/were adopaction was not required.	pted by the board of directors without shareholder action and shareholder	der
The amendment(s) was/were adoption was not required.	pted by the incorporators without shareholder action and shareholder	
Dated		
selected	rector, president or other officer – if directors or officers have not bee l, by an incorporator – if in the hands of a receiver, trustee, or other coed fiduciary by that fiduciary)	n urt
-	(Typed or printed name of person signing)	
	President (Title of person signing)	