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C. CARGINIFIES

COVERLETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION:	IN'S CHINA	ONE, INC	
DOCUMENT NUMB			2	
The enclosed Articles of	f Amendment and fee are su	ibmitted for filing.		
Please return all corresp	ondence concerning this ma	tter to the following:		
-		Name of Contact Perso	n	
-		Firm/ Company		
S558 /2 PARK BLVD				
	PINELLA		337 2 /	
	darhu e	City/ State and Zip Cod	CON notification)	
<u>. — — </u>	E-mail address: (to be us	sed for future annual report	notification)	
For further information	concerning this matter, pleas	se call:		
	S. HU	ar(<u>72'7</u>		
Name of	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)	☐S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Maili	na Address	Stroot	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

	CHINA CNE, INC.	
	urrently filed with the Florida Dept. of State)	
	CCC44732 mber of Corporation (if known)	
(OR unen Nu	thoer of Corporation (II known)	
Pursuant to the provisions of section 607,1006, Florida Statute its Articles of Incorporation:	es, this Florida Profit Corporation adopts the following an	rendment(s) to
A. If amending name, enter the new name of the corporati	ion:	
	Th	e new
name must be distinguishable and contain the word "corp," "Inc.," or Co.," or the designation "Corp," "Inc, word "chartered," "professional association," or the abbrevi	poration," "company," or "incorporated" or the abbre or "Co". A professional corporation name must cont	viation
B. Enter new principal office address, if applicable:		
(Principal office address <u>MUST BE A STREET ADDRESS</u>))	CONT
		··· ··· ··· ·· ·· ·· ·· ·· ·· ·· ·· ·· ·· ·
C. Enter new mailing address, if applicable:		(O)
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)		<u> </u>
	(C) (C)	ြို့ တ္တ
	=	3 8
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office a		
Name of New Registered Agent		
(Flo	orida street address)	
New Registered Office Address:	, Florida	
	(City) (Zip Code	1
New Registered Agent's Signature, if changing Registered	Agent:	
I hereby accept the appointment as registered agent. I am fai	miliar with and accept the obligations of the position.	
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 tisted 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	PT	John Doc	
X Remove	<u>Y</u>	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change	<u>S</u>	MIN LIN	136 LOYOLA DR
_ X _ Add			ORMOND BEACH, F
Remove			32176
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	cles, enter change(s) here: (Be specific)		
<u> </u>			
	M		
			
Con an	ange, reclassification, or cance	ellation of issued share	<u>s,</u>
i an amendment provides for an excha-	-de if a i d i- ab -		
provisions for implementing the amer	adment if not contained in the	amendment itsen:	
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f an amendment provides for an exchaprovisions for implementing the amer (if not applicable, indicate N/A)	ndment if not contained in the	amendment tisett:	

The date of each amendment(s) adoption:date this document was signed.	ob/01/2016	, if other than the
Effective date if applicable:	06/01/2016	
(n	o more than 90 days after amendment file date)	
Note: If the date inserted in this block does not a document's effective date on the Department of Stat		nis 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 appro		nent(s)
☐ The amendment(s) was/were approved by the sha must be separately provided for each voting gro	reholders through voting groups. The following st up entitled to vote separately on the amendment(s)	
"The number of votes east for the amendment	ent(s) was/were sufficient for approval	
by(voting		
(voting	group)	
☐ The amendment(s) was/were adopted by the boar action was not required.	d of directors without shareholder action and share	cholder
The amendment(s) was/were adopted by the inco- action was not required.	rporators without shareholder action and sharehold	ler
Dated <u>cblot/></u> Signature <u>: Win</u>	ort	
Signatura i Mara	his	
(By a director, presiden	t or other officer - if directors or officers have not	been
	rator - if in the hands of a receiver, trustee, or othe	r court
appointed fiduciary by	that fiduciary)	
	YENG LIN	
(Тур	ed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	