P1600055849

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PFC 2 7 2017



COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORA	TION: CHUAN CAFE IN	<u> </u>				
DOCUMENT NUMBE	R: P16000055849					
	*Amendment and fee are sul	bmitted for filing.				
Please return all correspo	ondence concerning this mat	ter to the following:				
F	RANK RONG					
_		Name of Contact Persor	1			
F	FRANK RONG CPA LLC					
-	<u></u>	Firm/ Company				
3	116 CAPITAL CIRCLE NE	: #3				
	Address					
יר	ALLAHASSEE, FL 32308					
		City/ State and Zip Code				
charlie(@verygoodcpa.com					
		ed for future annual report	notification)			
	,	•	,			
For further information of	concerning this matter, pleas	e call:				
FRANK RONG		at (668-4925			
Name of	Contact Person		de & Daytime Telephone Number			
Enclosed is a check for t	he following amount made p	payable to the Florida Depa	rtment 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)			
Ameno Divisio P.O. B	ng Address Iment Section on of Corporations ox 6327 assee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle ssee, FL 32301			

Articles of Amendment

to

Articles of Incorporation

of	
Chuan Cas Tro	
(Name of Corporation as currently filed with the Florida Dept. of State)	
DIL CONCESY 99	
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amen its Articles of Incorporation:	dment(s) to
A. If amending name, enter the new name of the corporation:	
	new
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbrevia "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain word "chartered," "professional association," or the abbreviation "P.A."	
B. Enter new principal office address, if applicable:	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	
	_
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 2400 FRED SMITH # 107	
TALLAHASSEE, FL 32303	
	_
	
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	_
(Lip Bolley	
New Registered Agent's Signature, if changing Registered Agent:	
I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position:	i
	•
	-
Signature of New Registered Agent, if changing	•

Mach	h <i>additional sh</i>	eets, if necessary	y). (Be specific	·)			
	·					 	_
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_		****					
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		<u> </u>					
	<u> </u>					<u> </u>	
							
					· · · · · ·		
an c	mandmant n	rovides for an ex	rahanaa zaalaa	ification or so			
provi	isions for imp	lementing the ar	nendment if no	t contained in t	he amendment	itself:	
(if not applicab	le, indicate N/A)				113cm	
							
_					 		
							
	_						

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>Jo</u>	ohn Doe	
X Remove	<u>V</u> <u>M</u>	fike Jones	
X Add	<u>SV</u> <u>Si</u>	ally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	P	KE XU	Chuan Cafe Inc
X Add			619 S. Woodward Ave. C-105
Remove			TALLAHASSEE, FL 32304
2) Change	VP	YUNYI LIU	Chuan Cafe Inc
X Add			619 S. Woodward Ave. C-105
Remove			TALLAHASSEE, FL 32304
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	<u> </u>
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date document's effective date on the Department of State's records.	will not 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)	
(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	
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)	
BIN LIN	
(Typed or printed name of person signing)	
$\vee P$	
(Title of person signing)	