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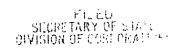
C LEWIS

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	TION: PANS FAMILY N	TARKET INC		
DOCUMENT NUMBE	R:			
The enclosed Articles of	Amendment and fee are su	bmitted for filing.		
Please return all correspo	indence concerning this mu	tter to the following:		
A	NGELINA C. LI			
_	, , , , , , , , , , , , , , , , , , , 	Name of Contact Persor	1	
11	JAL ACCOUNTING P.A.			
		Firm/ Company		
3.	363 SHERIDAN STREET :	STE 214		
_		Address		
11	OLLYWOOD, FL 33021			
		City/ State and Zip Code		
ANGEI	.@JALACCOUNTING.CC	М		
	E-mail address: (to be us	ed for future annual report	notification)	
For further information of	concerning this matter, pleas		963-6606	
	23. 4. 4.44	at (954) 963-6606 de & Daytime Telephone Number	
	Contact Person he following amount made p		·	
1 \$35 Filing Fcc	■\$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)	
Amand Divisio P.O. R	ng Address Innent Section on of Corporations ox 6327 usee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle usec, FL 32301	

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2016 DEC -9 AM 11: 32

Articles of Amendment to Articles of Incorporation of

(twine of QV por Hand to Saltation	y filed with the Florida Dept. of State)
P16000084286	
(Document Number o	f Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this is Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
NONE	The new
name must be distinguishable and contain the word "corporatio "Corp," "Inc.," or Co.," or the designation "Corp," "Inc." or ' word "chartered," "professional association," or the abbreviation	n," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the
	NONE
3. Enter new principal office uddeess, if applicable: Principal office address <u>MUST RE A STREET ADDRESS</u>)	4
C. Enter new mailing address, if applicable:	140177
(Mailing address MAY BE A POST OFFICE BOX)	NONE
. If we and the the mediatered senat well of engistered office odd	ress in Florida, enter the name of the
). If amonding the registered agent and/or registered office and	
new registered agent and/or the new registered office address	<u>u</u>
new registered agent and/or the new registered office address Name of New Registered Agent NONE	
new registered agent and/or the new registered office address	
Name of New Registered Agent Name of New Registered Agent	reet address)
Name of New Registered Agent Name of New Registered Agent	

Page 1 of 4

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; F= Vice President, T- Treasurer; S= Secretary; D- Director; TR+ Trustee; C - Chairman or Clerk; CEO " Chief Executive Officer: CFO - Chief I inancial 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 Changa	<u>PT</u>	John Doe		
X Remove	<u>v</u>	Mike Junes		
<u>X</u> Add	SY	Sally Smith		
Type of Action (Check One)	Title	Name	<u>Addres</u> s	
1) Change	V	MEI XIA I'AN	2293 SW 17TH AVE	
X \ \dd			MIAMI, FL 33145	
Remove				
2)Change				
Add				
Remove				
3) Change	 ,			
Remove				
4) Change		·		
Add				
Remove			**************************************	
5) _ Change				
Add			Approximation of the second se	
Remove			**************************************	
6) Change				
Add				
Remove				

Page 2 of 4

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		in exchange, reclassi	<u>lication, or cancellati</u>	on of issued shores,	
lf an amendm	ent provides for a		contained in the ame	ndment itself:	
provisions fo	r implementing th	<u>je amenament it noi.</u> Vzar			
provisions for (if not ap	ent provides for a r implementing th plicable, indicate?	<u>va)</u>			
provisions for (if not ap	r implementing th	ic amendment it not VA)			
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Page 3 of 4

Fig.10 SECRETARY OF SHAPE OWISION OF CORECTATION

2018 DEC -9 AMII: 32

The date of each amendment(s) as	loption:	if other than the
date this document was signed.		
Effective date ![applicable:		
•	(no more than 90 days after amendment file date)	
Note: If the date inscried in this bedocument's effective date on the Do	lock does not meet the applicable statutory filing requirements, this date we partment of State's records.	vill not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were add by the shareholders was/were su	pred by the shareholders. The number of votes east for the amendment(s) fleient for approval.	
The amendment(s) was/were approximate the separately provided for	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
"The number of votes case	for the uniondment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/were ude action was not required.	pted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were add action was not required.	pted by the incorporators without shareholder action and shareholder	
Dated <u>& </u>	200 P	
Signature (By a d	irector, president or other officer - if directors or officers have not been	
selected	I, by an incorporator - if in the hands of a receiver, trustee, or other court	
appoint	ed fiduciary by that fiduciary)	
	MEI L. PAN	
	(Typed or printed name of person signing)	
	PSTD	
	(Title of person signing)	, 12, i. i. i.

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