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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	ATION: KUMO SIX MILE	EINC			
DOCUMENT NUMBI	D1700000504				
The enclosed Articles o	f Amendment and fee are su	bmitted for filing	ļ.		
Please return all corresp	ondence concerning this ma	tter to the followi	ing:		
A	AIHUA WU				
~		Name of Con	tact Persor	1	
4	KUMO SIX MILE INC				
_	Firm/ Company				
7	7950 DANI DRIVE UNIT 335-345				
	Address				
Ą	FORT MYERS, FL 33966				
-		City/ State and	d Zip Cod	2	
YVON	NEYANCPA@GMAIL.CO)M			
	E-mail address: (to be us	sed for future ann	ual report	notification)	
For further information	concerning this matter, pleas	se call:			
AIHUA WU		at (^{2:}	39	337-9555	
Name of	Contact Person	u	Area Co	de & Daytime Telephone Number	
Enclosed is a check for t	the following amount made ${}_{\parallel}$	payable to the Flo	orida Depa	rtment of State:	
□ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filin Certifted Co (Additional c enclosed)	ру	\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Amen Divisi	ng Address dment Section on of Corporations Box 6327		Amend Divisio	Address ment Section n of Corporations Building	

Tallahassee, FL 32314

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

(Name	of Corporation as currently filed with the I	lorida Dept. of State)
P17000000504		
	(Document Number of Corporation (if l	.nown)
Pursuant to the provisions of section 607 its Articles of Incorporation:	1006, Florida Statutes, this <i>Florida Profit Co</i>	rporation adopts the following amendment
A. If amending name, enter the new n	ame of the corporation:	
		Th&3 new
"Corp.," "Inc.," or Co.," or the designword "chartered," "professional associa		
B. <u>Enter new principal office address,</u> (Principal office address <u>MUST BE A S</u>		
		
C. Enter new mailing address, if appl	icable:	
(Mailing address MAY BE A POST	OFFICE BOX)	· · · · · · · · · · · · · · · · · · ·
D. If amonding the mediatored agent are	.d/an manistana d a00 dda to 121 to 21	
new registered agent and/or the ne	id/or registered office address in Florida, en w registered office address:	iter the name of the
	AIHUAWU	
Name of New Registered Agent		
	7950 DANI DRIVE UNIT 335-345	
	(Florida street address)	
New Registered Office Address:	FORT MYERS	. Florida
New Registered Office Address.	(City)	(Zip Code)
New Registered Agent's Signature, if c	hanging Registered Agent:	
hereby accept the appointment as regist	ered agent. I am familiar with and accept th	e obligations of the position.
	Adda X	
	AITIUA WU	
	Signature of New Registered Agent i	f 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>	John Doe	
X Remove	V	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	Р	YANG, LIANG WEN	7950 DANI DRIVE UNIT 335-345
Add			FORT MYERS, FL 33966
X Remove			
2) Change	P	WU, AIHUA	7950 DANI DRIVE UNIT 335-345
X Add			FORT MYERS, FL 33966
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here:				
	(Attach additional sheets, if necessary). (Be specific)			
F.	If an amendment provides for an exchange, reclassification, or cancellation of issued shares,			
	provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)			

The date of each amendment(s) a date this document was signed.	doption:	, if other than the
Effective date if applicable:		
and in applicable.	(no more than 90 days after amendment file date)	
Note: If the date inserted in this lead to coment's effective date on the De	plock does not meet the applicable statutory filing requirements, this datepartment of State's records.	te will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were add by the shareholders was/were so	opted by the shareholders. The number of votes cast for the amendment(sufficient for approval.)
☐ The amendment(s) was/were appure must be separately provided for	proved by the shareholders through voting groups. <i>The following stateme</i> each voting group entitled to vote separately on the amendment(s):	nt
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/were add action was not required.	opted by the board of directors without shareholder action and shareholde	r
☐ The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder action and shareholder	
04/13/2017 Dated		
Signature	ALHUA WU	
selecte	irector, president or other officer — if directors or officers have not been d, by an incorporator — if in the hands of a receiver, trustee, or other court ted fiduciary by that fiduciary)	
	AIHUA WU	
	(Typed or printed name of person signing)	****
	PRESIDENT	
	(Title of person signing)	