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## **COVER LETTER**

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPOR	RATION: PSP Bangkok Squa	are Inc.			
DOCUMENT NUME	BER:				
	of Amendment and fee are su	bmitted for filing.			
Please return all corres	spondence concerning this man	tter to the following:			
	Sukanda Preechachaow				
		Name of Contact Persor	1		
	PSP Bangkok Square Inc.				
		Firm/ Company			
	6500 SW Archer Rd., Suite J				
		Address			
	Gainesville, FL 32608				
		City/ State and Zip Code	2		
len	ıda.pr@gmail.com				
Sukai		sed for future annual report	notification)		
	is more water, we see	tu ivi iuure uumuu repiiri			
For further information	n concerning this matter, pleas	se call:			
Sukanda Preechachao	w	at (	de & Daytime Telephone Number		
Name (	of Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	rtment of State:		
\$35 Fitting 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)		
Mailing Address Amendment Section Division of Corporations P.O. Box 6327		Amend Divisio	Address Iment Section on of Corporations Building		

2661 Executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment ŧo

## Articles of Incorporation of

Fli.Ei

PSP Bangkok Square, Inc.	2017 DEC 11 PM 1-5
(Name of Corporation as curren	tly filed with the Florida Dept. of State)
P17000003769	
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, this Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
n/a	Thenew
name must be distinguishable and contain the word "corporati "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	n/a
(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)	n/a
D. If amending the registered agent and/or registered office ad- new registered agent and/or the new registered office addre	dress in Florida, enter the name of the ss:
Name of New Registered Agent	
Name (g Sew regisarea Agent	
(Florida s	rreet address)
New Registered Office Address:	Civ) , Florida (Zip Code)
	(ca)
New Registered Agent's Signature, if changing Registered Ager	<u>11:</u>
I hereby accept the appointment as registered agent. I am familia	r with and accept the ortigations 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 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	$\underline{V}$	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) X Change	8	Sukanda Preechachaow	6500 SW Archer Rd, Suite J
Add			Gainesville, FL 32608
Remove			
2) Change	V	Kamolrat Kiativitayasophon	6500 SW Archer Rd, Suite J
XAdd			Gainesville, FL 32608
Remove			
3.) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Arti (Attach additional sheets, if necessary).	(Be specific)	
√a		
. If an amendment provides for an exclusions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:	
(if not applicable, indicate N/A)		
ı∕a		

The date of each amendment(s) adop	12/7/17	, if other than the
date this document was signed.		, if viner than the
Effective date if applicable:	12/7/17	
THE COST CARE IT APPLICATE.	(no more than 90 days after amendment file date)	
Note: 4f the date inserted in this bloc document's effective date on the Depar	ek does not meet the applicable statutory filing requirements timent of State's records.	s, this date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were adopte by the shareholders was/were suffic	ed by the shareholders. The number of votes east for the ame cient for approval.	ndment(s)
	ved by the shareholders through voting groups. The following th voting group entitled to vote separately on the amendmen	
"The number of votes east for	the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were adopte action was not required.	ed by the board of directors without shareholder action and sh	narcholder
☐ The amendment(s) was/were adopte action was not required.	ed by the incorporators without shareholder action and shareh	older
Dated	4/7/17	
Signature	2/7/17 Sukanda	
(By a directed, by a directed, by a directed, by a directed, by a directed by a direct	ctor, president or other officer – if directors or officers have r by an incorporator – if in the hands of a receiver, trustee, or o fiduciary by that fiduciary)	
Su	rkanda Preechachaow	
	(Typed or printed name of person signing)	<del></del>
Se	ecretary	
_	(Title of person signing)	