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TO: Amendment Section

Division of Corpor	rations	Λ	•
NAME OF CORPORA	ATION: Advance	ed climate	Services, Inc.
DOCUMENT NUMBI	ER: P1700	0007884	
The enclosed Articles o	f Amendment and fee are sub	omitted for filing.	
Please return all corresp	ondence concerning this mat	ter to the following:	
-	shaoyu Li	u	
		Name of Contact Person	
, . <u>-</u>	ACS		
	1227 Daks Ea	Firm/Company	
_	Tullahere	Address 1 \ \ \ 3 \ \ 3 \ \ 1 \ \ \ \ \ \ \ \ \	
\$	Email address: (to be as	City/ State and Zip Code Common Code ed for future annual report	. ,
For further information	concerning this matter, pleas	e call:	
Name o	of Contact Person		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)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ame Divi P.O.	ling Address endment Section sion of Corporations Box 6327 ahassee, FL 32314	Ameno Divisio Cliftor	Address Iment Section on of Corporations Building Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment

to

Articles of Incorporation

	of			
- Advanced Como	ite Services	, Inc.		
•	rrently filed with the Florida	Dept. of State)		
P1700007				
(Document N	umber of Corporation (if know	vn) · ·		,
Pursuant to the provisions of section 607.100	6, Florida Statutes, this Florid	la Profit Corporation adopt	ts the following am	endment(s) to
its Articles of Incorporation:		·		•
A. If amending name, enter the new name	of the corporation:			
			701	
name must be distinguishable and contain	the word "cornoration" "	company" or "incorporat	The	new viation
"Corp.," "Inc.," or Co.," or the designation				
word "chartered," "professional association				
B. Enter new principal office address, if a	muliaahla.			,
(Principal office address MUST BE A STRI				
		•		8 7
			3.0	=======================================
C. Enter new mailing address, if applicat			بار در المراجع المراجع المراجع المراجع المراج	<u> </u>
(Mailing address MAY BE A POST OF	FICE BOX)			
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D. If amending the registered agent and/o	or registered office address is	Florida, enter the name	of the	•
new registered agent and/or the new r				٠, .
Name of New Registered Agent	•	• •		
Name of New Registered Agent			, • •	••
·	·			
	(Florida street ad	ldress)		·
New Registered Office Address:		. Florida		
	. (City)		(Zip Code)	•
		• •		
		•	•	

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.

Signature of New Registered Agent, if changing

address of ca (Attach addit. Please note ti P = Presiden Executive Off held. Preside. Changes show a change, Mi Mike Jones, V	ich Officer and/or Director b ional sheets, if necessary) he officer/director title by the fi t; V= Vice President; T= Trea ficer; CFO = Chief Financial nt, Treasurer, Director would i tld be noted in the following m	eing added: irst letter of the office title: asurer; S= Secretary; D= Director; TR= Officer. If an officer/director holds morbe PTD. anner. Currently John Doe is listed as the Sally Smith is named the V and S. The	er/director being removed and title, name, and Trustee; $C = Chairman \ or \ Clerk$; $CEO = Chief$ Trustee; than one title, list the first letter of each office the PST and Mike Jones is listed as the V. There is se should be noted as John Doe, PT as a Change,	
Example: X_Change	PT John Do	<u>oe</u>		
X Remove	<u>V</u> <u>Mike Jo</u>	nes		
X Add	<u>SV</u> <u>Sally Sr</u>	nit <u>h</u>		
Type of Action (Check One)		Name A MA	<u>Addres</u> s	
1) Cha	$\mathcal{D}_{\mathcal{A}}$	Ronald Moore	3424 Whippoorwil	1 Dr
Add	1		Talla FLa 132316	
Rer	nove	William Long		
2) Cha	nge Certicox	line luf	3424 WH. DBOCKW	ill D
Ad	Term		Talla Fl. 22310	٠.,
Ren	nove	1		
3) Ch	ange P	shaoyu Liu	1227 Oaks Edge Rd	
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Re	move		<u> </u>	· · · .
4) Cha	inge	,.		
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6) Ch	ange		·	
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If an amendme	ent provides for an exc	change, reclassific	ation, or cance	llation of iss	ued shares,	
	r implementing the amplicable, indicate N/A)	endment if not co	ntained in the	amenament	itseii:	
provisions for	nicaote, maicate WA)			•		•
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The date of each amendment(s) adoption: 5//// date this document was signed.	· 	if other than the
date this document was signed.		
Effective date if applicable:		
(no more than 90 days after amendment file date)		
		•
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		
(voling 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.		ŕ
Dated	•	
Signature Ceisling 5/11/1	′7	_
(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)		
chaplu liu		
(Typed or printed name of person signing)		- .
Muner ? presalect		. '
(Title of person signing)	•	