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COVER LETTER

7.

TO: Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

NAME OF CORPOR	RATION: FAI DONG CHIN	ESE FOOD INC			
DOCUMENT NUME	BER:				
	of Amendment and fee are su	bmitted for filing.			
Please return all corres	pondence concerning this ma	tter to the following:			
	GLORIA GUO CPA				
		Name of Contact Persor	1		
	GLORIA GUO & ASSOCIA	TES CPA PA			
		Firm/ Company			
	9200 BELVEDERE ROAD S	SUITE 103			
	Address				
	WEST PALM BEACH, FL	33411			
	-	City/ State and Zip Cod	<u> </u>		
GLOI	RIAGUOCPA@GMAIL.COM	М			
	E-mail address: (to be us	sed for future annual report	notification)		
For further information	1 concerning this matter, pleas	se call:			
GLORIA GUO CPA		at (<u>561</u>	386-8212		
Name of Contact Person		Area Co	de & Daytime Telephone Number		
Enclosed is a check for	r the following amount made	payable to the Florida Depa	irtment 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)		
	ling Address		Address		
Amendment Section Division of Corporations		Amendment Section Division of Corporations			
Division of Corporations		Division of Corporations			

Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FAI DONG CHINESE FOOD INC

(Name o	f Corporation as currently	filed with the Florida Dept. of State)
P17000046771		
	(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006. Florida Statutes, this <i>F</i>	Florida Profit Corporation adopts the following amendment(s) t
A. If amending name, enter the new na	me of the corporation:	
	ation "Corp," "Inc," or "C	The new" "company," or "incorporated" or the abbreviation to". A professional corporation name must contain the P.A."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
		1 ASSEE, FLORDA
D. If amending the registered agent an new registered agent and/or the new		
Name of New Registered Agent	CAIZHEN ZHONG	
tune of their negistered tigen	2919 N MILITARY TRAII	. STE D
	(Florida stre	et address)
New Registered Office Address:	WEST PALM BEACH	Florida 33409
<u>меж недіметей Одісе майгезз</u> .		City) (Zip Code)
		ith and accept the obligations of the position.

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>1 1</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change	Р	LUP CHI CHEUNG	2919 N MILITARY TRAIL STE E
Add			WEST PALM BEACH, FL 33409
X Remove			
2) Change	P	CAIZHEN ZHONG	2919 N MILITARY TRAIL STE D
X Add			WEST PALM BEACH, FL 33409
Remove			
3) Change			
Add			
Remove			·
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)	
		
		
If an amendment provides for an exch	hange, reclassification, or cancellation of issued shares,	
(if not applicable, indicate N/A)	endment if not contained in the amendment itself:	
	, ————————————————————————————————————	

The date of each amendment(s)	adoption:	, if other than the
date this document was signed.	(20)	
9/1 Effective date <u>if applicable</u> :	/2017	
The state of the s	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the E	block does not meet the applicable statutory filing requirements, this date will be partment of State's records.	I not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were ac by the shareholders was/were s	dopted by the shareholders. The number of votes east for the amendment(s) sufficient for approval.	
	oproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):	
"The number of votes eas	t for the amendment(s) was/were sufficient for approval	
by	<u>.</u>	
	(voting group)	
☐ The amendment(s) was/were action was not required.	lopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were ac action was not required.	lopted by the incorporators without shareholder action and shareholder	
8/24/2017 Dated	· · · · · · · · · · · · · · · · · · ·	
Signature	N went	
select	director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court nted fiduciary by that fiduciary)	
	LUP CHI CHEUNG	
	(Typed or printed name of person signing)	·· ·
	PRESIDENT	
	(Title of person signing)	