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COVER LETTER

Division of Corporations NAME OF CORPORATION: USA VZZK GROUP INC DOCUMENT NUMBER: _ The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Name of Contact Person YUS CPA CORP Firm/ Company PO BOX 78952 CORONA CA 92877 Address City/ State and Zip Code E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Area Code & Daytime Telephone Number Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: ☐ \$35 Filing Fee **□\$43.75** Filing Fee & ■\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy (Additional Copy enclosed) is enclosed) Mailing Address Amendment Section Street Address Amendment Section

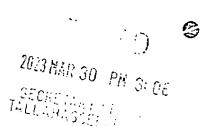
Mailing Address
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

TO: Amendment Section

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of



(Name of Corporation as cur	rently filed with the Florida Dept. of State)
17000063745	
	iber of Corporation (if known)
ursuant to the provisions of section 607.1006, Florida Statutes, s Articles of Incorporation:	, this Florida Profit Corporation adopts the following amendment(s
. If amending name, enter the new name of the corporation	<u>on:</u>
Inbank Inc	The new
ame must be distinguishable and contain the word "corporation Inc.," or Co.," or the designation "Corp," "Inc," or "Co chartered," "professional association," or the abbreviation	on, ""company," or "incorporated" or the abbreviation "Corp.," o". A professional corporation name must contain the word P.A."
Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS)	N/A
rincipal office address <u>most be 215 (west 2000) and</u> f	
Enter new mailing address, if applicable: (Mailing address MAY RE A POST OFFICE BOX)	N/A
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ad Name of New Registered Agent	<u>idress:</u>
mant of the migrature rigin	
(Flor	ridu street address)
M. Buristand Office Address	, Florida
New Registered Office Address:	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered thereby accept the appointment as registered agent. I am fam	<u>Agent:</u> siliar with and accept the obligations of the position.

Check if applicable

The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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)

Example:

Please note the officer/director title by the first letter of the office title:

P = President; V= Vice President; T= Treusurer; S= Secretary; D= Director; TR= Trustec; 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.

X Change	Ľ	70mi 120c	
X Remove	<u>Y</u>	Mike Jones	
X Add	$S\underline{V}$	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change		N/A	
Add			
Remove			
2) Change			
Add			
Remove 3) Change			
Add			-
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			-
6) Change			
Add			
Remove			

N/A					
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			-		
				<u> </u>	<u>-</u>
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		-			
				·	
an amendment provides for an exc	hange, reclassificati	on, or cancelleti	on of issued shar	<u>ęs,</u>	
orovirions for implementing the am (if not applicable, indicate N/A)	endment if not conti	nined in the ame	ndment ilsell:		
N/A					
					 -
	<u>-</u>			·	-

03/16/2023	
The date of each amendment(s) adoption:date this document was signed.	, if other than the
Effective date	
(no more than 90 days after amenament fue utile)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will ned document's effective date on the Department of State's records.	ot be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.	nareholder
☐ 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 east for the amendment(s) was/were sufficient for approval	
hy" (voting group)	
(voting group)	
03/17/2023	
Dated	
Signature (M Yao	
(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)	
LIN YAO	
(Typed or printed name of person signing)	
DIRECTOR	
(Title of person signing)	