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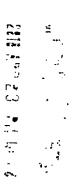
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APR 25 2018

COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: _ J-PETAL 18 INC. DOCUMENT NUMBER: P17000083492 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: SISLEY HE Name of Contact Person C & S ACCOUNTING & TAX INC Firm/ Company 3915 MAIN ST STE 203 Address FLUSHING, NY 11354 City/ State and Zip Code CST010101@GMAIL.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: SISLEY HE Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: S35 Filing Fee ■\$43.75 Filing Fee & □\$43.75 Filing Fee & \$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed)

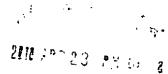
Mailing Address

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

Street Address

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation of



J-PETAL 18 INC. (Name of Corporation as currently filed with the Florida Dept. of State) P17000083492 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "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) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: MING TONG HUANG Name of New Registered Agent (Florida street address) New Registered Office Address: (Cit.)

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,

Senature New Registered Agent, if changing

(Attach additional sheets, if necessary	rticles, enter change). (Be specific)			
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			<u> </u>	
f an amendment provides for an ex provisions for implementing the ar	change, reclassifica	tion, or cancellation	of issued shares,	
(if not applicable, indicate N/A)	nenament ii not con	tained in the amend	iment itseif:	
				
		•		

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	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
l'i Change	PT	WEI LIN	6437 WINDER OAKS BLVD
Add			ORLANDO, FL 32819
X Remove			
2) Change	РТ	MING TONG HUANG	6437 WINDER OAKS BLVD
X Add			ORLANDO, FL 32819
Remove			
3) Change	<u>V</u>	GAOFENG HUANG	6437 WINDER OAKS BLVD
X Add			ORLANDO, FL 32819
Remove			
4) Change	Т	RI XIN HUANG	6437 WINDER OAKS BLVD
X Add			ORLANDO, FL 32819
Remove			
5) Change			_
Add			
Remove			
6) Change		_	
Add			
Remove			

The date of each amendment(s) a date this document was signed.	doption:	, if other than the
Effective date if applicable:		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Note: If the date inserted in this I document's effective date on the De	block does not meet the applicable statutory filing requirements, this department of State's records.	ate will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were add by the shareholders was/were st	opted by the shareholders. The number of votes cast for the amendment(officient for approval.	S)
	proved by the shareholders through voting groups. The following statem each voting group entitled to vote separately on the amendment(s):	ent
"The number of votes east	for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
☐ The amendment(s) was/were addaction was not required.	opted by the board of directors without shareholder action and sharehold	er
☐ The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder action and shareholder	
04/10/2018 Dated		
Signature	12	
selecte	director, president of other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other couted fiduciary by that fiduciary)	
	MING TONG HUANG	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	