## P18000023585

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	TONBO IMAGIN	IG INC	·····
DOCUMENT NUMB	P18000023585	· · · · · · · · · · · · · · · · · · ·	<del>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</del>
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	EGLIANA GOMEZ		
	WD BUSINESS CONSULTA	Name of Contact Person ANTS	n
•	1555 BONAVENTURE BLV	Firm/ Company D SUITE 1020	
•	WESTON, FL 33326	Address	
-		City/ State and Zip Cod	e
EGLL	ANA.GOMEZ@GMAIL.CO	M	
<del></del>	E-mail address: (to be us	sed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
EGLIANA GOMEZ		954 at (	4532295
Name o	f Contact Person	Area Co	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)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building xecutive Center Circle assee, FL 32301

## Articles of Amendment to Articles of Incorporation of

TONBO IMAGING INC	
(Name of Corporation as currently filed with the Florida Dept. of State) P18000023585	
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amend its Articles of Incorporation:	lment(s)
A. If amending name, enter the new name of the corporation:	
The name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviat "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain word "chartered," "professional association," or the abbreviation "P.A."	tion
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:	_
Name of New Registered Agent	
(Florida street address)	
New Registered Office Address:, Florida, City) (City) (Zip Code)	<b></b>
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	T
	U

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>	Name	<u>Addres</u> s	
X 1) Change	AssMg	MARIA C. FIGUERA SOT	TELDO 1439 CAPRI LN APT 5704	
Add			WESTON, FL 33326-4014	
Remove				
2) Change		<u> </u>		
<b>Ad</b> d			<del> </del>	
Remove			•	
3) Change				
Add				
Remove			<del></del>	
4) Change	<del></del>			
Add				
Remove				
5) Change		-		
Add			<u> </u>	
Remove				
6) Change		-		
Add				
Remove				

Attach <i>additio</i>	r adding additional Artinal sheets, if necessary).	(Be specific)			
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rovisions fo	ent provides for an exchir implementing the amen plicable, indicate N/A)	ange, reclassificat idment if not cont	ion, or cancellational interest in the amer	on of issued share adment itself:	S.
<del></del>		<del></del> -	<del></del>		
<del> </del>	<del></del>			· ·	
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					· · · · · · · · · · · · · · · · · ·
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The date of each amendment(s) adopted date this document was signed.	tion:, if other than it
•	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
Note: If the date inserted in this bloc document's effective date on the Depart	k does not meet the applicable statutory filing requirements, this date will not be listed as titnent of State's records.
Adoption of Amendment(s)	(CHECK ONE)
☐ The amendment(s) was/were adopte by the shareholders was/were suffice	d by the shareholders. The number of votes cast for the amendment(s) ient for approval.
	red by the shareholders through voting groups. The following statement is the 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	(voting group)
	(voung group)
The amendment(s) was/were adopte action was not required.	d by the board of directors without shareholder action and shareholder
action was not required.	d by the incorporators without shareholder action and shareholder
DatedApril 18, 2010	K.L. Men
Signature	
	ter, president or other officer - if directors or officers have not been
	y an incorporator - if in the hands of a receiver, trustee, or other court
appointed	fiduciary by that fiduciary)
1.4	KSHMIKUMAR, ARVIND
	(Typed or printed name of person signing)
CE	50
<del></del>	(Title of person gigning)