## Division of Cornerations

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(((H18000146940 3)))



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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : I20000000019 Phone : (305)552-5973 Fax Number : (305)675-5944

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email	Address:			

## COR AMND/RESTATE/CORRECT OR O/D RESIGN **GUANGZHOU AST LOGISTIC CORP**

Certificate of Status 0 Certified Copy Page Count 05 **\$35.00** Estimated Charge

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MAY 11 2018

T. LEMEUX



LAZARUS CORPORATE TOTAL TAX

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Articles of An	rendment		
ta Articles of Inco	rperation		
of	• • • • • • • • • • • • • • • • • • • •		
GUANOZHOU AST L	OGISTIC CORP		
(Name of Corporation as currently	filed with the Florida Dept. of	State)	
P18000033	958		
(Document Number of	Corporation (if known)		
Pursuant to the provisions of section 607.1006, Florida Statutes, this I its Articles of Incorporation:	Torida Profit Corporation 2dopti	the following amends	ment(5) tû
A. If amending same, enter the new name of the corporation:			
GUANGZHOU AST LOC	SISTIC LIMITED CORP	The n	<b></b> .
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.," or the abbreviation "I word "chartered," "professional association," or the abbreviation "I B. Enter new principal affice address, if applicable:	Co". A professional corporation	ed" or the abbreviati	on
(Principal office address MUST BE A STREET ADDRESS)			
			-
			-
C. Enter new mailing address, if anolicable;			
(Mailing address MAY BE A POST OFFICE BOX)			-
			-
			_
To The monditure the exceptanced against an also unsubstanced affiliar additional	Till the serve the name of		-
D. If amending the resistered agent and/or registered office address:  new registered agent and/or the new registered office address:		( the	
Name of New Registered Agent			
Dame of New Vertiles at Votali			
(Florida stre	nut nelebrore)	<del></del>	
New Registered Office Andress:	, Fic	orida(Zip Coda)	-
		•	
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar w		the position.	
Signature of New Re	egistered Agent, if changing		
			77
		MAY SERVICE STATES	entages Physics
		8. F. O	m
Page 1 c	of 4	<b>→</b>	111
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If amunding the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer sud/or Director being added:

(Attach additional sheets, if necessary)

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

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Choirman or Clerk: CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first latter 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.

<u>A</u> Change	FL	10th TK	<u>76</u>	•
X Remove	$\underline{\mathbf{v}}$	Mike Jo	men.	
X Add	<u>\$v</u>	Sally Sr	ոլն	
Type of Action (Check One)	Title		Name	Address
<ol> <li>Change</li> </ol>		_		
Add	•			
Remove				
2) Change		_		
Add				
Remove				
3) Change		_		
Add				
Remove				
4) Change				
Add		_		
Remove			•	
5)Change				
Add				
6) Change		_		
Add			·	
Remove				

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LAZARUS CORPORATE TUTAL TAX

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amending or adding add thach additional sheets, if	itional Articles, e necessary). (Be s	nter change(s) hero specific)	<b>:</b>		
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		<del></del>			
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	<del></del>	_ <del></del>	<del> </del>		
<del></del>	· <del></del>			·	
			·		
			•		
an amendment provides provisions for implement (if not applicable, Indi	for an exchange, ing the amendmen cate N/A)	reclassification, or it if not contained !	cancellation of issu n the amendment i	ed shares. self:	
(I) in apparent, thu	<b></b>				
(в им фремови, или					
у им фрекови, или					
у чин аругисти, ини					
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LAZARUS CORPORATE TOTAL TAX

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The date of each amendment(s) adoption:	if other than the
date this document was signed.	
Effective date if applicable:	
(no more thus 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date document's effective date on the Department of State's records.	will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
So The amendment(s) was/were adopted by the shareholders. The number of votes cost for the amendment(s) by the shareholders was/were sufficient for approval.	
The amendment(s) was/were approved by the shereholders 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	
(voting group)	
The amandment(s) wes/were adopted by the board of directors without chareholder action and shareholder action was not required.	
☐ The minendment(*) was/were adopted by the incorporators without shareholder action and shereholder action was not required.	
Dated 05 to 2018	
Signature	
(By a director, president of other officer - if directors or officers have not been	<del></del> ,
selected, by an incorporator — if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
(Typed or printed funne of person signing)	<del></del>
Man dest	
(Title of person signing)	