P18000008093

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COYER LETTER

TO: Amendment Section

Division of Corporations NAME OF CORPORATION: AING INC DOCUMENT NUMBER: P18000068093 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: TAO AN Name of Contact Person Firm/ Company 15415 MONTESINO DR Address ORLANDO, FL 32828 City/ State and Zip Code TAOAN@BELLSOUTH.NET E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: _ at (407) 529-5548
Area Code & Daytime Telephone Number TAO AN 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 Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) **Mailing Address Street Address** Amendment Section Amendment Section

Division of Corporations

2661 Executive Center Circle Tallahassee, FL 32301

Clifton Building

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Articles of Amendment to Articles of Incorporation of

to

AING INC		
(Name of Corporation as currently f	filed with the Florida Dept. of State)	
P18000068093		
(Document Number of C	Corporation (if known)	
Pursuant to the provisions of section 607.1006. Florida Statutes, this <i>Fla</i> its Articles of Incorporation:	orida Profit Corporation adopts the follow	ing amendment(s
A. If amending name, enter the new name of the corporation:		
		The new
name must be distinguishable and contain the word "corporation," "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Coword "chartered," "professional association," or the abbreviation "P.,	". A professional corporation name mus	abhreviation
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		201
(Mailing duaress MAT BE A POST OFFICE BOX)		SEP 26
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:	is in Florida, enter the name of the	AH 9: 04
Name of New Registered Agent		© (* ∓
(Florida street	e address)	_
New Registered Office Address: (C	, Florida	ip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar wit	th and accept the obligations of the position	n.
Signature of New Reg	gistered Agent, if changing	_

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	$\underline{\mathbf{v}}$	Mike Jones				
X Add	<u>SV</u>	Sally Smith				
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s			
1) Change	P	NGHIEP T GIANG	805 PARK MANOR DR			
X Add			ORLANDO, FL 32825			
Remove						
2) Change	Р	THANII T GIANG	805 PARK MANOR DR			
Add			ORLANDO, FL 32825			
X Remove						
3) Change						
Add						
Remove						
4) Change	<u> </u>					
Add						
Remove						
5) Change						
Add						
Remove						
6) Change						
Add						
Remove						

Attach <i>additio</i>	or adding additional Argonal sheets, if necessary).	(Be specific)				
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f an amendn	nent provides for an exc	hange, reclassif	ication, or cand	ellation of issued	l shares,	
provisions for	or implementing the amopplicable, indicate N/A)	endment if not c	ontained in the	amendment itse	<u>lf:</u>	
(ij nin aj	урисате, таксте (УА)					
						
					<u>.</u>	
					<u> </u>	
	**					- -
						
						

The date of each amendment(s) adoption:	, if other than the
Effective date if applicable:	
(no more than 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) (<u>CHECK ONE</u>)	
■ The amendment(s) was/were adopted by the shareholders. The number of votes east 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 cast for the amendment(s) was/were sufficient for approval	
by" (voting group)	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated	
(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)	
(Typed or printed name of person signing)	
Pacsident (Title of person signing)	
(little of person signing)	