## P180000 18492

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2018 AUG 28 AM 8: 45 SECRETARY OF STATE

## **COVER LETTER**

**TO:** Amendment Section **Division of Corporations** NAME OF CORPORATION: TCPA P18000068492 DOCUMENT NUMBER: \_ The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Joseph Truong Name of Contact Person **Pholicious** Firm/ Company 2284 Corbett Rd. Address Orlando, FL 32826 City/ State and Zip Code TRUONGJOSEPH@YAHOO.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (407 ) 435-3377

Area Code & Daytime Telephone Number JOSEPH TRUONG 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 (Additional Copy enclosed) is enclosed) Mailing Address Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

## FILED

TCPA

2018 AUG 28 AM 8: 45

TOPA	3314 JISS 24 1117 5 14
(Name of Corporation	on as currently filed with the Shoftla Dent of State ATE
P18000068492	TALLAHASSEE, FL
(Docum	nent Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	a Statutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the co	erporation:
	The new
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp. word "chartered," "professional association," or the	d "corporation," "company," or "incorporated" or the abbreviation ," "Inc," or "Co". A professional corporation name must contain the abbreviation "P.A."
B. Enter new principal office address, if applicable (Principal office address <u>MUST BE A STREET ADD</u>	<u>:</u> DRESS )
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO.	$\Delta \mathcal{Y}$
D. If amending the registered agent and/or register new registered agent and/or the new registered	
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent.	istered Agent: I am familiar with and accept the obligations of the position,
Signe	ature of New Registered 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 D	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	<u>ones</u>	
X Add	<u>sv</u>	Sally S	<u>mith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) X Change	P		BUI, TRUONGJOSEPH	2284 CORBETT RD.
Add				ORLANDO, FL 32826
Remove				
2) Change	<b>7</b>	<del>_</del>		
Add				
Remove				
3)Change		_		<del></del>
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change				
Add		_		
Remove				

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
THE NAME OF THE PRESIDENT (BUI, TRUONGJOSEPH) IS SPELLED WRONG. IT IS SUPPOSE TO BE
BUI, CINDY
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:  (if not applicable, indicate N/A)
(у посирунешне, такие пом)

The date of each amendmen date this document was signed		, if other than the
Effective date if applicable:	8/9/18	
	(no more than 90) days after amendment file date)	
Note: If the date inserted in document's effective date on t	this block does not meet the applicable statutory filing requirements, this date he Department of State's records.	will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
☐ The amendment(s) was/we by the shareholders was/w	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.	
☐ The amendment(s) was/we must be separately provide	re approved by the shareholders through voting groups. The following statement ed for each voting group entitled to vote separately on the amendment(s):	
"The number of votes	s cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/we action was not required.	re adopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/we action was not required.	re adopted by the incorporators without shareholder action and shareholder	
<b>8/21/</b> Dated	2018	
Signature	CB149	
(I se	By a director, president or other officer – if directors or officers have not been elected, by an incorporator – if in the hands of a receiver, trustee, or other court ppointed fiduciary by that fiduciary)	<del></del>
	BUI, CINDY	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	