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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: SURF CRAB INC		
DOCUMENT NUM	P18000095774		
The enclosed Articles	of Amendment and fee are sul	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	CHUN QI QIU		
		Name of Contact Person	1
	SURF CRAB INC		
		Firm/ Company	
	1327 S. STATE ROAD 7		
	Address		
	NORTH LAUDERDALE, FL 33068		
		City/ State and Zip Cod	2
	ANGEL@JALACCT.COM		
	E-mail address: (to be us	ed for future annual report	notification)
For further information	on concerning this matter, pleas	e call:	
CHUN QI QIU		561 at (332-7490 de & Daytime Telephone Number
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	or the following amount made p	payable to the Florida Depa	artment of State:
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Am Div P.O	iling Address endment Section ision of Corporations . Box 6327 lahassee, FL 32314	Amend Divisio The Co	Address Iment Section In of Corporations In of Tallahassee S. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

(Name of Corporation	as currently filed with the Florida Dept. of State)
P18000095774	
(Docume	nt Number of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida S its Articles of Incorporation:	Statutes, this Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the cor-	poration:
NONE	The new
name must be distinguishable and contain the word "corp" Inc.," or Co.," or the designation "Corp," "Inc," "chartered," "professional association," or the abbrevi	poration," "company," or "incorporated" or the abbreviation "Corp.," or "Co". A professional corporation name must contain the word ation "P.A."
	NONE
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDR	UESS)
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NONE
D. If amending the registered agent and/or registered	duffine address in Florida, enter the name of the
new registered agent and/or the new registered of	fice address:
Name of New Registered Agent NONE	30 (
March John Registred Agent	· (-1
-	(Florida street address)
New Registered Office Address:	. Florida י
New Registered Copice Address.	(City) (Zip Code)
New Registered Agent's Signature, if changing Regist I hereby accept the appointment as registered agent. To	tered Agent: am familiar with and accept the obligations of the position.
Signati	are of New Registered Agent, if changing

Check if applicable

 \Box The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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)

Example:

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.

X Change	\underline{PT}	John Doe	
X Remove	\underline{V}	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	VP	KONG DA TANG	25 TERRA PINES GATE
Add X Remove			YAPHANK, NY 11980
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change		_	
Add			
Remove			
6) Change			
Add			
Remove			

NONE	d sheets, if necessary). (Be specific	7	
NONE	·		
			
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F. If an amendme	nt provides for an exchange, reclass	sification or cancellation of iss	ned shares
<u>provisions for</u>	mplementing the amendment if no	t contained in the amendment	itself:
	icable, indicate N/A)		
NONE			
			

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	JULY 1, 2020	
The date of each amendment(s)	adoption:	, if other than the
date this document was signed.		
Effective date if applicable:	LY 1, 2020	
and in applicable.	tno more than 90 days after amendm	ent file date)
Note: If the date inserted in this document's effective date on the I	block does not meet the applicable statutory filing Department of State's records.	requirements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were action was not required.	lopted by the incorporators, or board of directors wit	hout shareholder action and shareholder
☐ The amendment(s) was/were ac by the shareholders was/were	lopted by the shareholders. The number of votes cas sufficient for approval.	at for the amendment(s)
☐ The amendment(s) was/were ap must be separately provided for	proved by the shareholders through voting groups. r each voting group entitled to vote separately on th	The following statement e amendment(s):
"The number of votes eas	t for the amendment(s) was/were sufficient for appro	oval
by		11
·	(voting group)	<u> </u>
	10/2020 hn101'01'U	
(By a c selecte	lirector, president or other officer – if directors or of d, by an incorporator – if in the hands of a receiver, ted fiduciary by that fiduciary)	ficers have not been trustee, or other court
	CHUNQI QIU	
	(Typed or printed name of person signir	g)
	PRESIDENT	
	(Title of person signing)	