## P180000 98136

(Re	equestor's Name)	
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PICK-UP	MAIT	MAIL
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## COVER LETTER

TO: Amendment Section

Division of Corporations
NAME OF CORPORATION: QN SOHO INC
DOCUMENT NUMBER: P/8000 98/36
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Muyen, Fennifer Name of Contact Person
QN SOHO INC.
Firm/ Company  122 S Howard Ave  Address
Tampa FL 33606  City/ State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Contact Person at (813) 841-5121  Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is enclosed)  \$35 Filing Fee & Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314  Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## Articles of Amendment

to Articles of Incorporation

Articles of Incorporation	
QN SUHU Inc	
(Name of Corporation as currently filed with the Florida Dept. of State)	
P18000098136	
(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 its Articles of Incorporation:	g amendment(s)
A. If amending name, enter the new name of the corporation:	
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the ab "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must c word "chartered," "professional association," or the abbreviation "P.A."	The new breviation ontain the
B. Enter new principal office address, if applicable:	•~3
(Principal office address MUST BE A STREET ADDRESS)	= .
	<u> </u>
C. Enter new mailing address, if applicable:	<del>-</del>
(Mailing address MAY BE A POST OFFICE BOX)	<u> </u>
	خ
	<del></del> 5
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 KWIN CAU	
13822 Stone Will w 122 S thwork	1 Ave
New Registered Office Address: IAMPA (City), Florida 336	
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	
Signature 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 Doc X Remove V Mike Jones X Add <u>SV</u> Sally Smith Type of Action Title Name Address 5 (Check One) Cevin CAO Stone Mill was 1) \_\_\_\_ Change \_\_\_ Remove Jennifer Nguyan 2) V Change \_\_\_\_ Add \_\_ Remove 3) \_\_\_\_ Change \_\_\_\_ Add \_\_\_ Remove 4) \_\_\_\_ Change \_\_\_\_ Add \_ Remove 5) \_\_\_ Change Add \_\_ Remove 6) \_\_\_\_ Change \_\_\_ Adđ

\_ Remove

If amending or adding a (Attach additional sheets,	dditional Article	es, enter change (Be specific)	(s) here:			
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. If an amendment prov	ides for an exch	ange, reclassific	ation, or cancella	tion of Issued sh	ares,	
provisions for implem (if not applicable,	nenting the amen indicate N/A)	idment if not co	ntained in the am	enament itsen:		
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The date of each amendment(s) adoption: 5/8/19  late this document was signed.	, if other than the
Effective date <u>if applicable</u> :  (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 will document's effective date on the Department of State's records.	not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast 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)	
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.	
Dated5/8/19	
Signature demological Company	
(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)	•
Jenn for Nguyen (Typed or printed name of person signing)	<u></u>
(Typed or printed name of person signing)	
President	
(Title of person signing)	