P19000008765

| (Requestor's Name) |
|---|
| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
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Office Use Only



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COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPO | RATION: DQ Kissimmee, In | c. | | |
|-----------------------------------|---|--|--|--|
| DOCUMENT NUM | P19000008765 | | | |
| The enclosed Articles | s of Amendment and fee are su | bmitted for filing. | | |
| Please return all corre | espondence concerning this ma | tter to the following: | | |
| | Xuan Zhang | | | |
| | | Name of Contact Person | 1 | |
| | | Firm/ Company | | |
| | 14042 Larkspur Lake Dr. | | | |
| | | Address | | |
| | Winter Garden, FL 34787 | | | |
| | • | City/ State and Zip Code | e | |
| xuan | zbj@yahoo.com | | | |
| | E-mail address: (to be us | sed for future annual report | notification) | |
| For further information | on concerning this matter, pleas | se call: | | |
| Xuan Zhang | | at (| _) 802-0566 | |
| Name of Contact Person | | Area Co | de & Daytime Telephone Number | |
| Enclosed is a check f | or the following amount made | payable to the Florida Depa | urtment of State: | |
| ■ \$35 Filing Fee | □\$43.75 Filing Fee & Certificate of Status | □\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | ☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) | |
| Mailing Address Amendment Section | | | Address Iment Section | |
| Division of Corporations | | Division of Corporations | | |
| P C | 1 Box 6327 | Clifton Building | | |

P.O. Box 6327 Tallahassee, FL 32314 Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

| DQ Kissimmee, Inc. | | | | | |
|--|--------------------------|---------------------------|---------------------------------------|---|----------|
| (Name of Corporation | on as currently filed w | vith the Florida Dept. o | f State) | | |
| P19000008765 | | | | | |
| (Docum | nent Number of Corpor | ation (if known) | | | |
| Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation: | a Statutes, this Florida | Profit Corporation adop | ots the following | g amendmen | t(s) to |
| A. If amending name, enter the new name of the co | rporation: | | | | |
| Evergreen Kissimmee, Inc. | | | | The new | |
| name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp. word "chartered," "professional association," or the designation of the designatio | " "Inc," or "Co". A | | | | |
| B. Enter new principal office address, if applicable (Principal office address <u>MUST BE A STREET ADD</u> | | | | | |
| | | | | ——— ~ <u>:</u> | |
| | | | | | |
| C. Enter new mailing address, if applicable: | | | • : | ======================================= | :: |
| (Mailing address MAY BE A POST OFFICE BO) | <u>X</u>) | | · · · | | |
| | | | | ω i | - ; |
| | | | • | PA | |
| | | | · · · · · · · · · · · · · · · · · · · | | <u> </u> |
| D. If amending the registered agent and/or register | | lorida, enter the name | of the | သွ | |
| new registered agent and/or the new registered | office address: | | | | |
| Name of New Registered Agent | | | | - | |
| | | | | _ | |
| | (Florida street addre | ss) | | | |
| New Registered Office Address: | | , F | lorida | | |
| | (City) | | (Zip (| Code) | |
| | | | | | |
| | | | | | |
| New Registered Agent's Signature, If changing Registered Agent, the appointment as registered agent. | | accept the obligations of | of the position. | | |
| , , , , , | , | | | | |
| | | | | | |
| | | | | _ | |
| Signa | ature of New Registere | d 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: XChange | <u>PT</u> | John Doc | |
|-------------------------------|-------------------------------------|--------------|--------------|
| X Remove | <u>v</u> | Mike Jones | |
| X Add | <u>sv</u> | Sally Smith | |
| Type of Action (Check One) | <u>Title</u> | Name | Address |
| 1) Change | | - | |
| Add | | | |
| Remove | | | |
| 2) Change | | | |
| Add | | | · |
| Remove | | | |
| 3) Change | ******* | | |
| Add | | | |
| Remove | | | |
| 4) Change | | | |
| Add | | | |
| Remove | | | |
| 5) Change | | <u> </u> | _ |
| Add | | | |
| Remove | | | - |
| 6) Change | · · · · · · · · · · · · · · · · · · | | _ |
| Add | | | |
| Remove | | | |

| | (Be specific) |
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| provisions for implementing the amer | ange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself: |
| f an amendment provides for an exch provisions for implementing the amer (if not applicable, indicate N/A) | ange, reclassification, or cancellation of issued shares, and adment if not contained in the amendment itself: |
| provisions for implementing the amer | ange, reclassification, or cancellation of issued shares, and and the amendment itself: |
| provisions for implementing the amer | ange, reclassification, or cancellation of issued shares, and and an angular in the amendment itself: |
| provisions for implementing the amer | ange, reclassification, or cancellation of issued shares, andment if not contained in the amendment itself: |
| provisions for implementing the amer | ange, reclassification, or cancellation of issued shares, and and the amendment itself: |
| provisions for implementing the amer | ange, reclassification, or cancellation of issued shares, andment if not contained in the amendment itself: |

| The date of each amendment(s) adoption: 5/6/2019 date this document was signed. | , 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) (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 | |
| ☐ 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_ 5/6/2019 | |
| 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) | |
| _ | |
| (Title of person signing) | |
| (Title of person signing) | |