P19000055779

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11/10/20

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF COR	RPORATION: KG1668 INC				
DOCUMENT N	UMBER: P19000055779				
	icles of Amendment and fee are su	bmitted for filing.			
Please return all o	correspondence concerning this ma	itter to the following:			
	Irene Cai				
		Name of Contact Person	n .		
	Yongmei Cai Association CF	Yongmei Cai Association CPA PA			
		Firm/ Company			
	601 N Congress Ave Ste 412	, -			
		Address			
	Delray FL 33445				
	_	City/ State and Zip Code	e		
	Youngmeicpa@gmail.com				
	E-mail address: (to be us	sed for future annual report	notification)		
For further inform	nation concerning this matter, plea	se call:			
Irene Cai		at ()		
N	ame of Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a che	ck for the following amount made	payable to the Florida Depa	artment of State:		
S35 Filing Fe	ee	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
	Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Amend Divisio The C	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810		

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

FILED

KG1668 INC

2020 OCT -2 PM 4: 05

KG1008 INC	2020 001 2 111 1 2
(Name of Corporation as	currently filed with the Florida Dept. of State TARY OF STATE
P19000055779	TALLAHASSEE. FL
(Document)	Number of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statits Articles of Incorporation:	utes, this Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corpor	ration:
N/A	The new
	ution," "company," or "incorporated" or the abbreviation "Corp.," "Co". A professional corporation name must contain the word on "P.A."
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRES</u>	<u></u>
C. Fatan ann an line address if an line line	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office	
Name of New Registered Agent	
	Florida street address)
New Registered Office Address:	, Florida
pew negatorea Office marcia.	(City) (Zip Code)
New Registered Agent's Signature, if changing Registere	ed Avent:
l hereby accept the appointment as registered agent. I am	
Signature	of New Registered Agent, if changing

Check if applicable

☐ 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 beld. 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	<u>PT</u>	John Doe		
X Remove	<u>V</u>	Mike Jones		
X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	Title	Name	<u>Addres</u> s	
1) Change	P	MA, JUNXIA	975 CREBIH RI)	
Add V Remove			NAPLES. FL 34/03	
2) Change	P	Kuo Wu	975 (RZEGHRD	
V Add			NAPLES FL 34/03	
Remove 3) Change Add				
Remove				
4) Change				
Add				
5) Change				
Add				
Remove 6) Change				
Add				
Remove				

amending or adding additional Arti tach additional sheets, if necessary).	(Be specific)
	The state of the second of the
	·
	· · · · · · · · · · · · · · · · · · ·
an amendment provides for an exch	hange, reclassification, or cancellation of issued shares,
(if not applicable, indicate N/A)	endment if not contained in the amendment itself:

. . .

The date of each amendment(s date this document was signed.) adoption:, 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 the document's effective date on the	s block does not meet the applicable statutory filing requirements, this date will not be liste Department of State's records.	d as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes east for the amendment(s) a sufficient for approval.	
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	
"The number of votes of	ast for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
09/28/20 Dated	1. (1)	
sele	a director, president or other officer – if directors or officers have not been cted, by an incorporator – if in the hands of a receiver, trustee, or other court pinted fiduciary by that fiduciary)	
	Kuo Wu	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	