P20 0000 74551

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: ENSON MARKET I	NC.	
DOCUMENT NUM	BER: P20000074551		
The enclosed Article.	s of Amendment and fee are su	bmitted for filing.	
Please return all corre	espondence concerning this ma	tter to the following:	
	Anthony Morales		
		Name of Contact Perso	n
	MyUSACorporation.com		
		Firm/ Company	
	1 Radisson Plaza, Suite 800		
		Address	
	New Rochelle, New York, 10801	<u> </u>	
		City/ State and Zip Cod	e
For further information	info@myusacorporation.com E-mail address: (to be us on concerning this matter, pleas	ed for future annual report se call:	notification)
Anthony Morales		at (<u>877</u>) 3302677
Name	of Contact Person		de & Daytime Telephone Number
Enclosed is a check f	or the following amount made p	payable to the Florida Dep	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.C	iling Address endment Section vision of Corporations D. Box 6327 lahassee, 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

FILED

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ENSON MARKET INC.				2 111 # 22
(Name	of Corporation as currer	ntly filed with the Florida De	Dt. of State)	RY OF STATE
P20000074551			MALLAF	MS等的智力
	(Document Number	of Corporation (if known)	<u>.</u>	
Pursuant to the provisions of section 607 its Articles of Incorporation:		•	adopts the fo	llowing amendment(s) t
A. If amending name, enter the new n	name of the corporation:			
name must be distinguishable and contain "Inc.," or Co.," or the designation "chartered," "professional association,			" or the abbr name must	The new reviation "Corp.," contain the word
B. Enter new principal office address, (Principal office address MUST BE A S	if applicable: TREET ADDRESS)			
C. Enter new mailing address, if appl (Mailing address <u>MAY BE A POST</u>	<u>icable:</u> <u>OFFICE_BOX</u>)			
D. If amending the registered agent an new registered agent and/or the new Name of New Registered Agent	nd/or registered office add w registered office addres YUAN YUAN WU	dress in Florida, enter the na s:	ime of the	
				
	5132 W COLONIAL DRIV	E trees address)		
		reel adaress)		
New Registered Office Address:	ORLANDO	(City)	_, Florida	32808 (Zip Code)
New Registered Agent's Signature, if c	ered ageni. I am familiar	t: with and accept the obligation Registered Agent, if changing	ns of the posi	tion.
Check if applicable		- • 3 6		
The amendment(s) is/are being filed po	ursuant 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)

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>	<u>John Do</u>	<u>oc</u>	
X Remove	<u>V</u>	Mike Jo	<u>nes</u>	
<u>X</u> Add	<u>sv</u>	Sally Sr	nith	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
l) Change		_		- <u></u>
Add				
Remove				
2) Change		_		
Add				
Remove 3) Change		_		
Add				
Remove				
4) Change		-		
Add				
Remove				
5) Change		-		
Add				
Remove				
Change		-		
Add				
Remove				

If amending or additional shall	eets, if necessary),	(Be specific)			
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If an area down					
If an amendment property of imple	colcolling the amen	inge, reclassificat dment if not con-	ion, or cancellat	<u>ion of issued sha</u> endment itself:	res,
(if not applicable	e, indicate N/A)	• •		2.5011.	
	 -	_	·		
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					<u> </u>
					
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				—— <u> </u>	···

The date of each amendment(s) adoption:	if other than the
Effective date if applicable:	
(no more than 90 days after amendment file date)	<u>-</u>
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date we document's effective date on the Department of State's records.	ill not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action are action was not required.	ıd shareholder
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	
Dated09/29/2020	
Signature	
(By a director, president or other officer – if directors or officers have not been selected, by an incompositor – if in the hands of a receiver, trustee, or other court appointed fiductary by that fiduciary)	
HNGHNG NI	
(Typed or printed name of person signing)	
Treasurer	
(Title of person signing)	