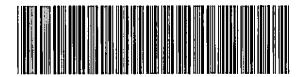
## Pa1000004856

(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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## COVER LETTER

**TO:** Amendment Section Division of Corporations

NAME OF CORPORA	ATION: BEST	EA INC.		
DOCUMENT NUMBE	:r: <u>P210000</u> 0	4856	<del> </del>	
The enclosed Articles of	Amendment and fee are sul	bmitted for filing.		
Please return all corresp	ondence concerning this ma	tter to the following:		
	awo	un Lin		
<del></del>		Name of Contact Persor	1	
	BE	ESTEA INC		
_		Firm/ Company		
	12025 Lak	ce Cypress Ci	r 8pt 205	
	Orlando	Address  L  City/ State and Zip Code	1818	
_	Bestea floric	da @ gmail.	cam	
For further information	concerning this matter, pleas			
Cinojun	<u>i</u> m	at ( 561	, 373 4108	
Name of	Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check for	the following amount made	payable to the Florida Dep:	artment of State:	
\$ \$35 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)	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327		Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810		
Laffar	assec, FL 32314	24131	v. withinge street, state of the	

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation οf

## FILED

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

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KHSTEA INC	SAST WAY TO THIS OF
(Name of Corporation as curren	itly filed with the Elorida-Dept- of States TATE.
D21000004856	TALLAHASSEE, FL.
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, thi its Articles of Incorporation:	is Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
N/A	The new
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co", "chartered," "professional association," or the abbreviation "P.A	A professional corporation name must contain the word
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u> )	1121 Alafaya Trail, Unit 1013 Oviedo, FL. 32765
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A
D. If amending the registered agent and/or registered office ad new registered agent and/or the new registered office address Name of New Registered Agent	
(Florida :	street address)
	Florida
New Registered Office Address:	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familia.	nt: r with and accept the obligations of the position.  Registered Agent, if changing
	registerea agent, ij caunging
Check if applicable	

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: <u>X</u> Change	PT John	<u>i Doe</u>		
X Remove	<u>V</u> <u>Mik</u>	e Jones		
<u>X</u> Add	<u>SV</u> <u>Sall</u>	y Smith		
Type of Action (Check One)	Tale	<u>Name</u>		<u>Addres</u> s
1) Change	CEO	Di Xion	ng	12025 Lake Cypress Ch
X_Add			J	Apt 205, Orlando, FL
Remove				32828
2) Change	····			
Add				
Remove 3 ) Change	·		·	
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4
6) Change		<del></del>		<del></del>
Add				
Remove				

N/A	rets, if necessary).					
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			<del></del> -			
					<del></del>	
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				•		
in amendment pr	ovides for an excha ementing the amend	nge, reclassific	ation, or cancel	llation of issued s	<u>shares,</u>	
(if not applicable	e, indicate N/A)	ament ii <u>not ct</u>	mamed in the .	menome <u>at risen</u>	<u></u>	
MA						
					<del></del>	
			· <u>·</u> ·			
- <del> </del>						

The date of each amendment(s) adoption: 06 0 2020	if other than
Effective date if applicable: 06/07/002 (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 widocument's effective date on the Department of State's records.	ill not be listed as
Adoption of Amendment(s) (CHECK ONE)	
X The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action ar action was not required.	id shareholder
The amendment(s) was/were adopted by the shareholders. The number of votes east 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 east for the amendment(s) was/were sufficient for approval	
by"	
(voting group)	
Dated 06/07/2021	
Signature  (By a directors president or other officer—if directors or officers have not been	<del></del>
selected, by an incorporator - if in the hands of a receiver, trustee, or other court	
appointed fiduciary by that fiduciary)	
Cruzius Lin	
(Typed or printed name of person signing)	
1/P	
(Title of person signing)	
• • • • • • • • • • • • • • • • • • • •	

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RECEIVED

2021 JUN 14 AM 8: 06

St. A. The St. A. The

May 27, 2021

YANG, YIZHU 12025 LAKE CYPRESS CIR APT 205 ORLANDO, FL 32828 US

SUBJECT: BESTEA INC. Ref. Number: P21000004856

We have received your document for BESTEA INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

YOU HAVE COMPLETED THE WRONG AMENDMENT FORM. PLEASE COMPLETE THE ATTACHED FORM.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Anissa Butler Regulatory Specialist II

Letter Number: 521A00010551