## P21000006894

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## **COVER LETTER**

TO: Amendment Section Division of Corporations NAME OF CORPORATION: DWK INTERNATIONAL INC DOCUMENT NUMBER: P21000006894 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: EVA DENG Name of Contact Person DWK INTERNATIONAL INC Firm/ Company 9122 ROCKROSE DR Address TAMPA, FL 33647 City/ State and Zin Code evadeng2006@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: JIN CHEN at (813 ) 999-1140
Area Code & Daytime Telephone Number Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: **\$35** Filing Fee □\$43.75 Filing Fee & ☐\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Mailing Address Street Address Amendment Section Amendment Section

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

DWK INTERNATIONAL INC (Name of Corporation as currently filed with the Florida Dept. of State) P21000006894 (Document Number of Corporation (if known) Pursuant to the provisions of section 607,1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: 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 abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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 \_ (Florida street address) New Registered Office Address: \_\_\_ 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

Check if applicable

<sup>☐</sup> The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), 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 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.

| X Change                      | <u>PT</u>    | <u>John Doe</u> |                  |
|-------------------------------|--------------|-----------------|------------------|
| X Remove                      | <u>V</u>     | Mike Jones      |                  |
| X Add                         | <u>sv</u>    | Sally Smith     |                  |
| Type of Action<br>(Check One) | <u>Title</u> | <u>Name</u>     | Address          |
| 1) Change                     | VP           | JUE WANG        | 9122 ROCKROSE DR |
| Add X Remove                  |              |                 | TAMPA, FL 33647  |
| 2) Change                     | VP           | FENGLAI MA      | 9122 ROCKROSE DR |
| X Add                         |              |                 | TAMPA, FL 33647  |
| Remove 3) Change              |              |                 |                  |
| Add                           |              |                 |                  |
| Remove                        |              |                 |                  |
| 4) Change                     |              |                 |                  |
| Add                           |              |                 |                  |
| Remove                        |              |                 |                  |
| 5) Change                     |              |                 |                  |
| Add                           |              |                 |                  |
| Remove                        |              |                 |                  |
| 6) Change                     |              |                 |                  |
| Add                           |              |                 |                  |
| Remove                        |              |                 |                  |

| =                                       | ts, if necessary). | (Be specific)         |                   |                          |      |
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| an amendment proverovisions for implem  |                    |                       |                   |                          | res, |
| (if not applicable,                     | indicate N/A)      | indirection in the co | manica in the bir | endinent figure.         |      |
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|   | 12/21/2021   |                                 |
|---|--|---------------------------------|
| The date of each amendment(s) ad  | ption:   | , if other than                 |
| date this document was signed.  | (2021  |                                 |
| Effective date <u>if applicable</u> :   | (2021  |                                 |
| Effective date in applicable.   | (no more than 90 days after amendment file date)   |                                 |
| Note: If the date inserted in this bl<br>document's effective date on the Dep | ick does not meet the applicable statutory filing requirements, artment of State's records.  | this date will not be listed as |
| Adoption of Amendment(s)  | ( <u>CHECK ONE</u> )   |                                 |
| The amendment(s) was/were adopaction was not required.                        | ted by the incorporators, or board of directors without sharehold  | er action and shareholder       |
| ☐ The amendment(s) was/were adopty the shareholders was/were sufficiently.    | ted by the shareholders. The number of votes east for the amendation of the approval.  | iment(s)                        |
| must be separately provided for e   | oved by the shareholders through voting groups. The following arch voting group entitled to vote separately on the amendment(s) or the amendment(s) was/were sufficient for approval | statement<br>'):                |
| by  |  |                                 |
| · ,   | (voting group)   |                                 |
| 12/21/2021  |  |                                 |
| Dated   |  |                                 |
| ~   |  |                                 |
| Signature   | 7  |                                 |
|   | ector, president or other officer - if directors or officers have no   |                                 |
|   | by an incorporator - if in the hands of a receiver, trustee, or oth  | er court                        |
| appoint   | d fiduciary by that fiduciary)   |                                 |
|   | EVA DENG   |                                 |
|   | (Typed or printed name of person signing)  |                                 |
|   | PRESIDENT  |                                 |
|   | (Title of person signing)  |                                 |