# PZICOCOTUIT

| (R                      | equestor's Name)       |         |  |  |
|-------------------------|------------------------|---------|--|--|
| (A                      | ddress)                | <u></u> |  |  |
| (A                      | ddress)                |         |  |  |
| <del>-</del> (C         | ity/State/Zip/Phone #) | )       |  |  |
| PICK-UP                 | ☐ WAIT                 | MAIL    |  |  |
| (B                      | usiness Entity Name)   |         |  |  |
| (Document Number)       |                        |         |  |  |
| Certified Copies        | Certificates of        | Status  |  |  |
| Special Instructions to | Filing Officer:        |         |  |  |
|                         |                        |         |  |  |
|                         |                        |         |  |  |
|                         |                        |         |  |  |
|                         |                        |         |  |  |

Office Use Only



100383258321

11/19/21--01012--003 \*\*30.00

03/17/22--01003--026 \*\*5.00

2022 HAR 17 PM 1:58 SEGNETARY OF STATE

MAR 22 2022 I ALBRITTON

#### COVER LETTER

### RECEIVED

TO: Amendment Section 2022 MAR | | AM | | 40 Division of Corporations tor a NAME OF CORPORATION: DOCUMENT NUMBER: \_ The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Address For further information concerning this matter, please call: 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 & □\$52.50 Filing Fee ☐\$43.75 Filing Fee & Certificate of Status Certificate of Status Certified Copy

#### **Mailing Address**

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, F1, 32314

#### Street Address

(Additional copy is

enclosed)

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street. Suite 810
Tallahassee, FL 32303

Certified Copy

(Additional Copy is enclosed)

## Articles of Amendment to

Articles of Incorporation

| of  |  |  |  |  |  |  |
|---|--|--|--|--|--|--|
| The Hura Shan INC   |  |  |  |  |  |  |
| (Name of Corporation as currently filed with the Florida Dept. of State)  |  |  |  |  |  |  |
| Y2100000 7000   |  |  |  |  |  |  |
| (Document Number of Corporation (if known)  |  |  |  |  |  |  |
| Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> 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 vorporation, ""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)  315 (AKF) - COV  - 35 (COV)  |  |  |  |  |  |  |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  POPOX 3500   |  |  |  |  |  |  |
| Exanden, Fl 33509   |  |  |  |  |  |  |
| 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:, Florida, Florida  |  |  |  |  |  |  |
| New Registered Agent's Signature, if changing Registered Agent:  Thereby 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   |  |  |  |  |  |  |

☐ The amendment(s) is/are being tiled 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 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>    | John Doe    |                 |
|-------------------------------|--------------|-------------|-----------------|
| 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> | <u>Addres</u> s |
| 1) Change                     |              |             |                 |
| Add                           |              |             |                 |
| Remove                        |              |             | ·               |
| 2) Change                     |              |             |                 |
| Add                           |              |             |                 |
| Remove<br>3 ) Change          |              |             |                 |
| Add                           |              |             |                 |
| Remove                        |              |             |                 |
| 4) Change                     |              |             |                 |
| Add                           |              |             |                 |
| Remove                        |              |             |                 |
| 5) Change                     |              | _           |                 |
| Add                           |              |             |                 |
| Remove                        |              |             |                 |
| 6) Change                     |              |             |                 |
| Add                           |              |             |                 |
| Damous                        |              |             |                 |

|   | ). (Be specific)                      |                     |                                       |             |
|---|---------------------------------------|---------------------|---------------------------------------|-------------|
|   |                                       |                     |                                       |             |
| · · · · · · · · · · · · · · · · ·                                       | <del></del> -                         |                     |                                       |             |
|   |                                       |                     |                                       |             |
|   |                                       | <del></del> ,       |                                       | -           |
|   |                                       |                     |                                       |             |
|   |                                       |                     |                                       |             |
|   |                                       |                     |                                       |             |
|   |                                       |                     |                                       |             |
|   |                                       |                     |                                       |             |
|   |                                       |                     |                                       |             |
|   |                                       |                     | -                                     |             |
|   |                                       |                     |                                       |             |
| <u> </u>  | <del></del>                           |                     |                                       |             |
|   |                                       |                     |                                       |             |
|   | · · · · · · · · · · · · · · · · · · · |                     |                                       |             |
|   |                                       |                     |                                       |             |
|   |                                       | <u> </u>            | · · · · · · · · · · · · · · · · · · · |             |
|   |                                       |                     | ·                                     |             |
| <del></del>   |                                       |                     |                                       |             |
|   |                                       |                     |                                       |             |
|   |                                       |                     |                                       |             |
|   | <del></del>                           |                     |                                       |             |
|   |                                       |                     |                                       |             |
| .,  |                                       | <del>_</del> ·      |                                       |             |
|   |                                       |                     |                                       |             |
|   |                                       |                     |                                       |             |
|   | <u> </u>                              |                     |                                       | <u></u> ,   |
|   |                                       |                     |                                       |             |
|   |                                       |                     |                                       |             |
|   |                                       |                     |                                       |             |
| <u>lf an amendment provides for an ex</u>                               | change, reclassifica                  | tion, or cancellati | on of issued shares                   | 1           |
|   | <u>nenament 11 not con</u>            | tained in the ame   | nament usen:                          |             |
| provisions for implementing the ar                                      |                                       |                     |                                       |             |
| provisions for implementing the ar<br>(if not applicable, indicate N/A) |                                       |                     |                                       |             |
| provisions for implementing the ar                                      |                                       |                     |                                       |             |
| provisions for implementing the ar                                      |                                       |                     |                                       | <del></del> |
| provisions for implementing the ar                                      |                                       |                     |                                       |             |
| provisions for implementing the ar                                      |                                       |                     |                                       |             |
| provisions for implementing the ar                                      |                                       |                     |                                       |             |
| provisions for implementing the ar                                      |                                       |                     |                                       |             |
| provisions for implementing the ar                                      |                                       |                     |                                       |             |
| provisions for implementing the ar                                      |                                       |                     |                                       |             |
| provisions for implementing the ar                                      |                                       |                     |                                       |             |
| provisions for implementing the ar                                      |                                       |                     |                                       |             |
| provisions for implementing the ar                                      |                                       |                     |                                       |             |
| provisions for implementing the ar                                      |                                       |                     |                                       |             |

. . . . .

| The date of each amendment(s) a   | doption:   | , if other than the              |
|---|--|----------------------------------|
| date this document was signed.  |  |                                  |
| Effective date if applicable:   |  |                                  |
| <del>-</del> -  | (no more than 90 days after amendment file date)   |                                  |
| <b>Note:</b> If the date inserted in this bedocument's effective date on the De | lock does not meet the applicable statutory filing requirements, this partment of State's records.   | s date will not be listed as the |
| Adoption of Amendment(s)  | (CHECK ONE)  |                                  |
| The amendment(s) was/were adaction was not required.                            | opted by the incorporators, or board of directors without shareholder  | action and shareholder           |
| ☐ The amendment(s) was/were ad-<br>by the shareholders was/were st              | opted by the shareholders. The number of votes cast for the amendm ifficient for approval.   | ent(s)                           |
|   | proved by the shareholders through voting groups. The following state each voting group entitled to vote separately on the amendment(s):               | lement                           |
| "The number of votes cast   | for the amendment(s) was/were sufficient for approval  |                                  |
| by  | <u> </u>   |                                  |
|   | (voting group)   |                                  |
| Dated   | 18/22  |                                  |
| Signature <u></u>   | CXUS Ray   |                                  |
| (By a d   | irector, president or other officer / if directors or officers have not be<br>d, by an incorporator – if in the hands of a receiver, trustee, or other | en<br>Sauet                      |
|   | ed fiduciary by that fiduciary)  | .ourt                            |
|   | Alexis Fray  | <u></u>                          |
|   | (Typed or printed name of person signing)  |                                  |
|   | Unext incorporate  | P                                |
|   | (Title of person signing)  |                                  |