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COVER LETTER

TO: Amendment Section Division of Corporations

DOCUMENT NUMBER: _____

The enclosed Articles of Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

ZHANG CHUANHE Name of Contact Person TANCEN WOOD GROUP, CORP Firm/ Company 2423 SW 147 AVE#312 Address MIAMI. FL 33185 City/ State and Zip Code

LEO@TANCENDES.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ZHANG CHUANHE at (786) 863-2299 Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department 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 Tallahassee, FL 32314 Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

4.	rticles of Incorporation
A	of
TANCEN WOOD GROUP, CORP	
	n as currently filed with the Florida Dept. of State)
P21000085283	
(Docume	ent Number of Corporation (if known)
suant to the provisions of section 607,1006, Florida S Articles of Incorporation:	Statutes, this Florida Profit Corporation adopts the following amend
If amending name, enter the new name of the cor	r <u>poration:</u>
TANCEN INDUSTRY, CORP	The
ne must be distinguishable and contain the word "car he.," or Co.," or the designation "Corp." "Inc," hurtered," "professional association," or the abbrev	rporation," "company," or "incorporated" or the abbreviation "Cor or "Co". A professional corporation name must contain the w viation "P.A."
<u>Enter new principal office address, if applicable:</u> incipal office address <u>MUST BE A STREET ADD</u> .	<u>RESS</u>)
<u>Enter new mailing address, if applicable:</u> (Mailing address <u>MAY BE A POST OFFICE BO)</u>	<u>x</u>)
If amending the registered agent and/or register new registered agent and/or the new registered (red office address in Florida, enter the name of the office address:
Name of New Registered Agent	
	(Florida street address)
	(Florida street adaress)
New Registered Office Address:	(Florida sireci dataress)

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)

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.

Chunges 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	<u>PT</u>	John Doc	
X Remove	<u>v</u>	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
i) Change			
Add			
Remove			
2) Change			
Add			
Remove	<u>_</u>		
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Кеточе			
6} Change			
Add			····
Remove			

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E. <u>If amending or adding additional Articles, enter change(s) here</u>: (Attach additional sheets, if necessary) (Be specific)

F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)

10/13/2021 09:16:24 CDT	To: 18506176381	Page: 6/6	From: FLORIDA ACCOUNTING ACCOUNTING L	-C Fax: 8442544044						
The date of each amendm	ent(s) adoption:		, if other than the	nc						
date this document was sign	ned.									
Effective date <u>if applicabl</u>	<u>e</u> :(no more than 9	(no more than 90 days after amendment file date)								
Note: If the date inserted document's effective date of	in this block does not meet the appli- on the Department of State's records.	cable statutory fil	ing requirements, this date will not be listed as t	he						
Adoption of Amendment(s) (<u>CHECK ONF</u>)									
	The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.									
The amendment(s) was by the shareholders was	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 must be separately pro	were approved by the shareholders the vided for each voting group entitled to	rough voting grou vote separately o	ps. The following statement in the amendment(s): hpproval	350 350						
"The number of v	otes cast for the amendment(s) was/w	ere sufficient for a	approval OCT	CRE V						
by	(voling group)		 س	F COR						
				UN ST						
Dated	10/11/2021		Ę							
Signatur	3 An 4/ 1		-	- 9 -						
o Every	(By a director, president or other off selected, by an incorporator – if in t appointed fiduciary by that fiduciar	he hands of a rece	or officers have not been iver, trustee, or other court							
	ZHANG CHU									
	(Typed or printed	name of person	signing)							
	PRESIDE	VT.								
	(Title of person :	signing)	······································							

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