522491

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SEP 26 2017

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: Nakatomi, Inc.		
DOCUMENT NUMB	C23401		
The enclosed Articles of	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	Ka Tai "Peter" Ma		
- -		Name of Contact Person	
	Nakatomi, Inc.		
- -		Firm/ Company	
	3085 Prescott Falls Drive		
-		Address	
	Jacksonville, Florida 32224		
- -	<u> </u>	City/ State and Zip Code	<u> </u>
map@	etminc.com		
	E-mail address: (to be us	sed for future annual report i	notification)
For further information	concerning this matter, pleas	se call:	
Ka Tai "Peter" Ma		at (_)
Name o	f Contact Person		le & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	rtment of State:
□ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ame Divis P.O.	ing Address indment Section sion of Corporations Box 6327 thassee, FL 32314	Amendi Division Clifton	Address ment Section n of Corporations Building secutive Center Circle

Tallahassee, FL 32301

Articles of Amendment to ` Articles of Incorporation of

Nakatomi, mc.		\
(Name o	of Corporation as curren	tly filed with the Florida Dept. of State)
S22491		
	(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, thi	s Florida Profit Corporation adopts the following amendm
A. If amending name, enter the new na	me of the corporation:	
N/A		The ne
	ation "Corp," "Inc," or	ion," "company," or "incorporated" or the abbreviatio "Co". A professional corporation name must contain th
B. Enter new principal office address, (Principal office address MUST BE A S		N/A
(Principal office dadress <u>prost be 2/3</u>	IRELI ADDRESS)	
C. Enter new mailing address, if appli	cable:	NV.
(Mailing address MAY BE A POST)		N/A
D. If amending the registered agent an	Nor registered office ad	drove in Florida, enter the name of the
new registered agent and/or the new		
Name of New Registered Agent	Ka Tai Ma	
- tame ty - test regime to the type of type of the type of	3085 Prescott Falls Driv	e
	(Florida s	street address)
New Registered Office Address:	Jacksonville	. Florida ³²²²⁴
New Registered Office Address.		(City) (Zip Code)
		•
New Registered Agent's Signature, if c		
I hereby accept the appointment as regist	ered agent. I am familia	r with and accept the obligations of the position.
		.1
	Ka Jal	Wa
	Signature of New	Registered Agent, if changing

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	$\underline{\mathbf{V}}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	P	Kai Ching Ma	3065 Prescott Falls Drive
Add			Jacksonville, FL 32224
X Remove			
2) X Change	VD	Fa Yin Ma	3065 Prescott Falls Drive
Add			Jacksonville, FL 32224
Remove			
3) Change	VD	Ka-Yin Ma-Strickland	3065 Prescott Falls Drive
X Add			Jacksonville, FL 32224
Remove			
4) Change	PTD	Ka Tai Ma	3085 Prescott Falls Drive
XAdd			Jacksonville, FL 32224
Remove			
51 Change	VD	Ka Man Ma	2452 Cool Springs Drive S.
X Add			Jacksonville, FL. 32246
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Artic (Attach additional sheets; if necessary).	eles, enter change(s) here: (Be specific)
N/A	
	
	
F. If an amendment provides for an exch	ange, reclassification, or cancellation of issued shares,
(if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
N/A	

The date of éach amondment(s) adoption:	, if other than the
date this document was signed.	
Oct. i. 2017	
Effective date <u>if applicable</u> :	
(no more than 90 days after amenament fite date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date wildocument's effective date on the Department of State's records.	l not be listed as the
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
☐ 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	
bv```	
by	
 ■ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required. □ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder 	
action was not required. La Jul Ma (By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
(Typed or printed name of person signing) President (Title of person signing)	
(Title of person signing)	