548298

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Bu	ısiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
1		:

Office Use Only



600240187766

10/15/12--01010--005 **35.00



Amend

OCT 1 6 2012 T. LEWIS

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION	GOLDEN J	ADE, INC.	
DOCUMENT NUMBER: S	48298		
The enclosed Articles of Amen		bmitted for filing.	
Please return all correspondence	e concerning this mat	ter to the following:	
KHO	A KIM TRAN	1	
GOL	DEN JADE,	Name of Contact Perso.	n
7330	W ATLANT	Firm/ Company IC BLVD	
MAR	GATE, FL 3	Address 3063	
		City/ State and Zip Cod	e
E-n For further information concern	·	ed for future annual report e call:	notification)
SHIRLEY CHANG	;	_{at (} 954	575-2544 de & Daytime Telephone Number
Name of Contac	et Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for the follo	owing amount made p	payable to the Florida Depa	artment of State;
<u>-</u>	43.75 Filing Fee & ertificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Add Amendment Division of C P.O. Box 632 Tallahassee, I	Section Corporations 27	Amend Division Clifton 2661 E	Address Iment Section on of Corporations Building xecutive Center Circle ussee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED

	of	AIZ OCT 15 PH 3: 53
GOLDEN JADE, INC.		SECRETARY UF STATE
(Name of Corporation as current	ly filed with the Florida Dept. of State)	ALLAHASSEE, FLORIDA
S48298		
(Document Numbe	r of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Floits Articles of Incorporation:	orida Statutes, this <i>Florida Profit Corporatio</i>	n adopts the following amendment(s) to
A. If amending name, enter the new name of th	e corporation:	
•		The new
name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation "C word "chartered," "professional association," or B. Enter new principal office address, if a pplica	orp," "Inc," or "Co". A professional corp the abbreviation "P.A." 1ble:	orporated" or the abbreviation poration name must contain the
(Principal office address <u>MUST BE A STREET A</u>	ADD RESS)	
	· .	
C. Enter new mailing address, if applicable:	·	
(Mailing address MAY BE A POST OFFICE	<u></u>	

	· · · · · · · · · · · · · · · · · · ·	
D. If amending the registered agent and/or registered agent and/or the new register		name of the
	od office address.	
Name of New Registered Agent	, i	
	(Florida street address)	
New Registered Office Address:	, Flori	da
	(City)	(Zip Code)
Name Port of the Control of the Cont		
New Registered Agent's Signature, if changing I hereby accept the appointment as registered agen	Registered Agent: nt. I am familiar with and accent the obligat.	ions of the position
> I ag is so is a magni	Janima and decept in Congun	on the position
Comment	New Registered Agent, if changing	
signature oj	i wew kegisterea Agent, ij 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)

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: X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	•
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	D	SIMON CHEN	7330 W ATLANTIC BLVD
Add			MARGATE, FL 33063
X Remove			
2) Change			
Add			
Remove			
3) Change			-
Add			
Remove			
4) Change		-	
Add			
Remove			
5) Change		· · · · · · · · · · · · · · · · · · ·	
Add			**************************************
Remove			
6) Change		_	
Add			
Remove			

	(Be specif					
				and the second of the second o	2 30 3	
					•	
		•	•			_
						
				<u> </u>		
						_
		·				
If an amendment provides for an exch	ange, recla	ssification, or	cancellatio	n of issued sh	ares.	
provisions for implementing the ame	ange, recla ndment if n	ssification, or ot contained	cancellation	on of issued shadment itself:	ares,	
If an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	nange, recla ndment if n	ssification, or ot contained	cancellation	on of issued shidment itself:	ares,	
provisions for implementing the ame	nange, recla ndment if n	ssification, or ot contained	cancellation	on of issued shi adment itself:	ares,	
provisions for implementing the ame	nange, recla ndment if n	ssification, or ot contained	cancellation	on of issued sh adment itself:	ares,	
provisions for implementing the ame	nange, recla ndment if n	ssification, or ot contained	cancellation the amer	on of issued shadment itself:	ares,	
provisions for implementing the ame	nange, recla ndment if n	ssification, or ot contained	cancellation	on of issued shadment itself:	ares,	
provisions for implementing the ame	nange, recla ndment if n	ssification, or ot contained	cancellation the amer	on of issued shadment itself:	ares,	
provisions for implementing the ame	nange, recla	ssification, or ot contained	cancellation the amer	on of issued shadment itself:	ares,	-
provisions for implementing the ame	nange, recla ndment if n	ssification, or ot contained	cancellation the amer	on of issued shadment itself:	ares,	
provisions for implementing the ame	nange, recla ndment if n	ssification, or	cancellation the amer	on of issued shadment itself:	ares,	
provisions for implementing the ame	nange, recla	ssification, or	cancellation the amer	on of issued shidment itself:	ares,	
provisions for implementing the ame	nange, recla	ssification, or ot contained	cancellation the amer	on of issued shadment itself:	ares,	
provisions for implementing the ame	nange, recla	ssification, or	cancellation the amer	on of issued shadment itself:	ares,	

The date of each amendment	(s) adoption: 9/30/2012
Effective date if applicable:	10/1/2012
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were by the shareholders was/we	e adopted by the shareholders. The number of votes east for the amendment(s) re sufficient for approval.
	e approved by the shareholders through voting groups. The following statement of for each voting group entitled to vote separately on the amendment(s):
	cast for the amendment(s) was/were sufficient for approval
by	(voling group)
	(voling group)
☐ The amendment(s) was/were action was not required.	e adopted by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were action was not required.	e adopted by the incorporators without shareholder action and shareholder
Dated	0-11-2012
Signature	X May
se	y a director, president or other officer - if directors or officers have not been lected, by an incorporator - if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)
	KHOA KIM TRAN
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)