## PIUODOODICAII

(Requestor's Name)
(Address)
(Address)
·
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
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Amend cus

MAR 0 8 2016

I ALBRITTON

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: K S XPRESS I	NC
DOCUMENT NUMBER: P14000010911	
The enclosed Articles of Amendment and fee are	e submitted for filing.
Please return all correspondence concerning this	matter to the following:
KELLY HUNG	
<del></del>	Name of Contact Person
	Firm/ Company
2115 FOUNDARY DRIV	'E
KATY TX 77493	Address
<del></del>	City/ State and Zip Code
KELLY6294@GMAIL.COM	
E-mail address: (to be	e used for future annual report notification)
For further information concerning this matter, pl	lease call:
KELLY HUNG	at (713 ) 2927547
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made	de payable to the Florida Department of State:
□ \$35 Filing Fee  □\$43.75 Filing Fee & Certificate of Status	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

20	//
2016 MAR	14 ED
ent. of State)	Phy 3.

K S XPRESS INC

ent Number of Corporation (if known)  Statutes, this Florida Profit Corporation adopts the following amenation:  The discorporation," "company," or "incorporated" or the abbrevia "Inc," or "Co". A professional corporation name must contain	ndment(s)
Statutes, this Florida Profit Corporation adopts the following americans:  The discorporation," "company," or "incorporated" or the abbrevia	
Statutes, this Florida Profit Corporation adopts the following americans:  The discorporation," "company," or "incorporated" or the abbrevia	
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l "corporation," "company," or "incorporated" or the abbrevi	new
l "corporation," "company," or "incorporated" or the abbrevi	
abbreviation "P.A."	
RESS )	<u> </u>
<u> </u>	
ed office address in Florida, enter the name of the	<del>-</del>
NG	
5 ST APT 18306	
(Florida street address)	
DERDALE 33323	
(City) (Zip Code)	
	ed office address in Florida, enter the name of the ffice address:  NG  5 ST APT 18306  (Florida street address)  DERDALE  , Florida  33323

## 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.

X Change	<u>PT</u>	John Doe		
X Remove	<u>v</u>	Mike Jones		
_ <u>X</u> Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	Title	<u>Name</u>	Address	
1) Change	P	SAM SHERDO	2125 FOUNDARY DR	
Add			KATY TX 77493	
X Remove				
2) X Change	Р	KELLY HUNG	2115 FOUNDARY DR	
Add			KATY TX 77493	
Remove			,	
3) X Change	VP	ANDRES HUNG	2125 FOUNDARY DR	
Add	,		KATY TX 77493	
Remove				
4) Change				
Add				
Remove				
5) Change	<u> </u>			
Add				
Remove				
6) Change				
Add				
Remove				

	(Be specific)
J/A	
	<del>-</del>
. If an amendment provides for an excha	ange, reclassification, or cancellation of issued shares,
	adment if not contained in the amendment itself:
provisions for implementing the amen	
provisions for implementing the amen (if not applicable, indicate N/A)	
provisions for implementing the amen (if not applicable, indicate N/A)	
provisions for implementing the amen (if not applicable, indicate N/A)	
(if not applicable, indicate N/A)	
(if not applicable, indicate N/A)	
provisions for implementing the amen (if not applicable, indicate N/A)	
provisions for implementing the amen (if not applicable, indicate N/A)	
provisions for implementing the amen	
provisions for implementing the amen (if not applicable, indicate N/A)	

The date of each amendment(s)	odoption:	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing requirements, this date epartment of State's records.	will not be listed as th
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were ac by the shareholders was/were s	opted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.	
	proved by the shareholders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s):	
"The number of votes cas	t for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were adaction was not required.	opted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were adaction was not required.	opted by the incorporators without shareholder action and shareholder	
Dated_ 02-	29.2016	
Signature	7-5	
(By a select	director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)	
	KELLY HUNG	
	(Typed or printed name of person signing)	<del></del>
	PRESIDENT	
	(Title of person signing)	