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SECRETARY OF STATE TALLAHASSEE, FLORIDA

APPROVEU AND FIL FO

D. BRUCE

OCT 1 3 2012

EXAMINER

COVER LETTER

TO: Registration S Division of Co SUBJECT:		
	Name of Limited Liability Company	
	Amendment and fee(s) are submitted for filing.	
Please return all corresp	ondence concerning this matter to the following:	
	Chao Tan	_
	Name of Person Tanjia Investments LLC Firm/Company	-
	1780 North Honore Avenue	12 OC SECR TALLA
	Sarasota, FL 34235 City/State and Zip Code Tarijia Investments @ gmail.com E-mail address: (to be used for future annual report notification)	FILE FILE T 15 HASSE
	Tarija Investment s @ gmail.com E-mail address: (to be used for future annual report notification)	APPNOYED AND FILED OCT 15 PH 12: 43 CRETARY OF STATE LAHASSCE, FLORID
For further information	concerning this matter, please call:	25 2
<u>Chao</u> Name	Tan at (941) 587-9959 of Person Area Code & Daytime Telephone Numb	er
Enclosed is a check for	the following amount:	
\$25.00 Filing Fee	(additional copy is enclosed) Certific	iling Fee, cate of Status & ed Copy onal copy is enclosed)

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability (A Florida Liability)	Stments LLC Company as it now appears on our mited Liability Company)	r records.)		
The Articles of Organization for this Limited Liability Con	mpany were filed on	2 1/11 and assigne	d	
Florida document number <u>L 11000 1 430 9 6</u>				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limite	ed liability company here:			
The new name must be distinguishable and end with the words "L.L.C."	s "Limited Liability Company," the	designation "LLC" or the abbre	viation	
Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET ADDRE	ESS)			
		SECR	19 20	
Enter new mailing address, if applicable:		5 <u>5</u>	<u>-</u> -	
(Mailing address MAY BE A POST OFFICE BOX)	·	<u>∽~~ c</u> mc -		
				
B. If amending the registered agent and/or registered agent and/or the new registered office addresses		ords, enter the name of th	new	
Name of New Registered Agent:		· · · · · · · · · · · · · · · · · · ·		
New Registered Office Address:				
	Enter Florida street address			
	, Florida			
	City	Zip Code		

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member **Type of Action** <u>Title</u> <u>Name</u> <u>Address</u> 1780 N. Honore Ave Samsota, FL 34235 MGRM Chen, Yve M MGRM _□□dd □□emove □ emove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Signature of member or authorized representative of a member Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00