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(Address)

(Address)

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TALLAHASSEE FLORIDA

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COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Kudu Investments, LLC

Name of Limited Liability Company

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

Please return all correspondence concerning this matter to the following:

Bo Qian

Name of Person

Kudu Investments, LLC

Firm/Company

5100 NW 33rd Avenue, Suite 239

Address

Fort Lauderdale, FL 33309

City/State and Zip Code

bqian@elandeng.com

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

For further information concerning this matter, please call:

Bo Qian

Name of Person

954 707-9283

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &
Certificate of Status

☒ \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional 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

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Kudu Investments, LLC

Page 1 of 3

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

MGR = Manager
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Bo Qian	5100 NW 33 rd Ave, Suite 239	☒ Add
		Fort Lauderdale, FL 33309	☐ Remove
MGR	Yunhao Chen	4352 Fox Ridge Dr.	☐ Add
		Weston, FL 33331	☒ Remove
			☐ Add
			☐ Remove
			☐ Add
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			☐ Remove
			☐ Add
			☐ Remove

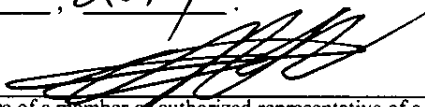
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

E. Effective date, if other than the date of filing: _____ (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated November 5, 2014



Signature of a member or authorized representative of a member

Bo Siem

Typed or printed name of signer

Page 3 of 3
Filing Fee: \$25.00

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