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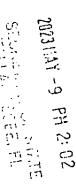
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SUBJEC	Tr. Nhu Realty	LLC				
		Name of Lim	ited Liability Company		D .	Ā
The enclo	osed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please ret	turn all correspo	ondence concerning this matter	to the following:			
		Vu Nhu Nguyen			_	
			Name of Person			
		Nhu Realty LLC				
		·	Firm Company		- 	20
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		3526 Citrine Place	Address			7
			Address			9
		Round Rock, TX 78681			_ (;) _ (;)	-0
		Nburcalty 101@ gmail.com	City State and Zip Code		- 四 : / - 日 2 :	-9 PH 2:02
		F-mail address; (to be used for future annual report noti	fication)	(Ti	10
For furthe	er information e	oncerning this matter, please c	aH:			
Vu Nguye	en		at (516) 375-2728			
	Name o	f Person	Area Code Daytim	e Telephone Numbe	·r	
Enclosed	is a check for th	ne following amount:				
	10 Filing Fee	⊆ \$30.00 Filing Fee &	 \$55.00 Filing Fee & 	□ \$60.00 F	ilina Caa	
۰۰۱ و های ا	AV T TIME T CC	Certificate of Status	Certified Copy (additional copy is enclosed)	Certifica Certifica	ate of Stat	
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	Registration S		Registration Sec			
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P.O. Box 6327 Tallahassee, FL 32314 The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303



ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Nhu Realty LLC (Name of the Limited Liability Company as it now appears on our records.) (A Florida Fimited Liabibity Company) The Articles of Organization for this Limited Liability Company were filed on ______ and assigned This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the attorney lations "LLC". Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Later Florida street address

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 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address. Thereby confirm that the limited liability company has been notified in writing of this change.

If amend a rized Person(s) authorized to manage, enter the title, name, and address of each person-being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

Title	Name	Address	Type of Action
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Dated	2/2022	
	$\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$	
	Signalure of a member of authorized representative of a member	
	Signature of a member-or authorized representative of a member Vu Nguyen	