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((H24000209602 3)))



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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : JUDY ZHU TAX SERVICES LLC
Account Number : I20230000182
Phone : (321)215-1310
Fax Number : (856)956-1099

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

JUN 19 AM 11:00

FILED

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
SHUXIN MASSAGE LLC

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T. LEMIEUX

JUN 20 2024

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COVER LETTER**TO: Registration Section
Division of Corporations**

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SUBJECT: SHUXIN MASSAGE 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:

ZHIMING FEI

Name of Person

SHUXIN MASSAGE LLC

Firm/Company

10694 SW 24TH ST

Address

MIAMI, FL 33165

City/State and Zip Code

floridafiling@yahoo.com

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

For further information concerning this matter, please call:

ZHIMING FEI

Name of Person

at (332) 378-8188

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 Address:**Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

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SHUXIN MESSAGE LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 06/03/2024 and assigned
Florida document number L24000250973

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 abbreviation "L.L.C."

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:

ZHIMING FEI

New Registered Office Address:

10694 SW 24TH ST

Enter Florida street address

MIAMI

City

Florida

33165

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 605, 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.

Zhiming Fei

If Changing Registered Agent, Signature of New Registered Agent

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If amending Authorized 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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	YI HAO	10694 SW 24TH ST, MIAMI, FL 33165	☐ Add
			☒ Remove
			☐ Change
AMBR	ZHIMING FEI	10694 SW 24TH ST, MIAMI, FL 33165	☒ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
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			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change

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

[illegible]

E. Effective date, if other than the date of filing: _____ (optional)
(If an effective date is listed, the date must be on or after the date of filing.)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)
Note: If the date inserted in this block does not meet the requirements of 605.0207 (3)(b), the date must be specific and cannot be prior to date of filing or more than 90 days after filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated 06/12 2024

Zhiming Fei

Signature of a member or authorized representative of a member

ZHIMING FEI

Typed or printed name of signee