## A0900000609

(Requestor's Name)				
(Address)				
(Address)				
(Cit	y/State/Zip/Phon	e #)		
PICK-UP	WAIT	MAIL		
(Bu	siness Entity Nar	ne)		
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to	Filing Officer.			
L <u> </u>				

Office Use Only



600340766996

02/20/20--01005--099 \*\*52.50

20 MAR - 5 PM 3: 47

brumo

MAR 1 1 2020 D CUSHING

## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: Mega GNG LUP Namo of Florida Limited Partnership or Limited Liability Limited Partnership	
The enclosed Certificate of Amendment and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to:	
Shih Wen Huang Contact Person  Mega GNG LUP Firm/Company  2809 W. Kelly Park Poad  Address  Apopka FL 32712  City. State and Zip Code  iCewin 269@ hotmail. com  E-mail address: (to be used for future annual report notification)	/ こここの シア・ストラン アン・ストラン アン・ストランド
For further information concerning this matter, please call:	
Ship Lie Huang at (407) 462-8028 45 33 Area Code and Daytime Telephone Number	31VL;
Enclosed is a check for the following amount:	
\$\int \\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$	
Mailing Address:Street Address:Registration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of TallahasseeTallahassee, FL 323142415 N. Monroe Street, Suite 810	

Tallahassee, FL 32303

2/3/20



February 22, 2020

SHIH WEN HUANG MEGA GNG LLLP 2809 W. KELLY PARK ROAD APOPKA, FL 32712

SUBJECT: MEGA GNG, LLLP Ref. Number: A09000000609

We have received your document for MEGA GNG, LLLP and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must be signed by a current general partner, if any, and by each newly designated general partner(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 620A00003934

Diane Cushing Senior Section Administrator

## CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIF OF

CERTIFICATE OF	LIMITED PARTNERSHIP	第 :
	OF	·'n 4
Mena Call	4 111P	70
Insertwame currently on	file with Florida Department of State	——————————————————————————————————————
•	,	
Durament to the provisions of austien 620 1202	Planida Statutaa thia Planida limitad m	السبّ
Pursuant to the provisions of section 620.1202. Imited liability limited partnership, whose certi	•	•
	lorida document number A0900	
adopts the following certificate of amendment to	o its certificate of limited partnership.	1
This amendment is submitted to amend the following	<b>:</b>	
A. If amending name, enter the new name of the	limited partnership or limited liability	limited partnership
here:		
New name must be distingui.	shable and contain an acceptable suffix.	· · · · · · · · · · · · · · · · · · ·
Acceptable Limited Partnership suffixes: Limited Partner Acceptable Limited Liability Limited Partnership suffixes		.P. or LLLP.
	·	
B. If amending mailing address and/or princ	cipal office address, <u>enter new mailir</u>	og address and/or
principal office address here:		
New Principal Office Address:		
(Must be STREET address)		
New Mailing Address: (May be post office box)		<del></del>
(May be post diffice tool)		<del></del>
C. If amending the registered agent and/or registered agent and/or the new registered office a		the name of the new
registered agent into or the new registered office a	Maress here.	
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	<del></del>
	, Florida	
<del></del> -	<del></del>	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.

If Changing Registered Agent, Signature of New Registered Agent

D. If amending the general partner(s), enter the name and business address of each general partner being added or removed from our records:

<u>Title</u>	<u>Name</u>		Address	Type of Action
GP_		Chi thuan	7 2809 W. Kelly Park Road	Add Remove
GP	<u> </u>	ng Chuany	2809 W Kelly East Apople	Pok   Add   A Remove
GP	Shihle	Jen Huang	2809 W. Kelly	Add Remove
GP_	Chring	Yi Huany	2809 W Kelly Fak Road Apo	Add Remove
				□ Add □ □ Remove
				□ Add □ Remove

- E. If the limited partnership or limited liability limited partnership is amending its "limited liability limited partnership" status, enter change here:
  - This Limited Partnership hereby elects to be a "Limited Liability Limited Partnership."
  - ☐ This Limited Partnership hereby removes its "Limited Liability Limited Partnership" status.

(NOTE: If adding or removing" limited liability limited partnership" status, all general partners must sign this amendment i

	<del></del>
	·
	· · · · · · · · · · · · · · · · · · ·
	er the date this document is filed by the Florida Department
State.) Note: If the date inserted in this block does not meet the apport listed as the document's effective date on the Department	
Signature(s) of a general partner or all general	partners*:
*NOTE: Only one current general partner is required to sig	gn this document unless the limited partnership is adding or atement. Chapter 620, F.S., requires all general partners to s
Shuw-Chi Huang Li- Ing Chuang	<del></del>
Li- Ing Churny	Chung Li Jug
Signature(s) of all new or dissociating general p	partner(s), if any:
	Ship to be I the and
a. Ish	Chiling You Huana
)	Chilling 15 Fictioning
filing Fee: \$52.50	
Certified Copy (optional): \$52.50 Certificate of Status (optional): \$8.75	