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(Re	questor's Name)	
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## **COVER LETTER**

TO:	Registration Secti Division of Corpo				
SUBJI	ест: <u>АС</u>	E Kitchen Din	cect, LLC		
The en	closed Articles of Ar	nendment and fee(s) are subn	nitted for filing.		
Please	return all correspond	ence concerning this matter to	o the following:		
		Ying	Feng Name of Person		
		Ace	Kotthen T Firm/Company	rirect, UC	
		3260 NU	N 23 rel A	tre, Sur	te 1200E
		Pompano	Beach, City/State and Zip Cod Sa @ g ma December to ture annuments	FL 3306	9
		a feng. US E-mail address: (to	Sa @ g ma i	il. Com al report notification	on)
For fu	rther information con	cerning this matter, please cal			
	Ying F. Name of P	eng	at ( <u>954</u> ) Area Code	907-32 Daytime Tele	ephone Number
Enclos	ed is a check for the	following amount:			
□ \$2	5.00 Filing Fee		□ \$55.00 Filing Fee Certified Copy (additional copy is e		□ \$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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Comp (A Florida Limited	pany as it now appears on our records.) d Fiability Company)
The Articles of Organization for this Limited Liability Companies Lo300036449.	by were filed on $9/25/2003$ and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited lia	bility company here:
The new name must be distinguishable and contain the words "Limited Lial	bility Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	<u> </u>
(Principal office address MUST BE A STREET ADDRESS)	- 00
	<u> </u>
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	22 N
B. If amending the registered agent and/or registered registered agent and/or the new registered office address he	office address on our records, enter the name of the newere:
Name of New Registered Agent:	ing Feng
New Registered Office Address: 3260	NW 23rd AVR, Suite 1200 E
Pompa	Enter Florida street address  NO Beach Florida 33069  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 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.

f Changing Registered Agent, Signature of New Registered Agent

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

Title Address Type of Action Name. 3260 NW 23rd Ave, Ste 1200E Add Lin, Song Pompano Beach, FL 33069 Remove \_□ Change 3260 NW 23 rd AVE, Ste 1200 E Pompano Beach, FL 33069 - Remove ☐ Change \_□ Add □ Remove ☐ Change □ Add □ Remove \_□ Change □ Add ☐ Remove \_□ Change

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Filing Fee: \$25.00