

From:

07/19/2021 08:52

#089 P.001/004

Division of Corporations

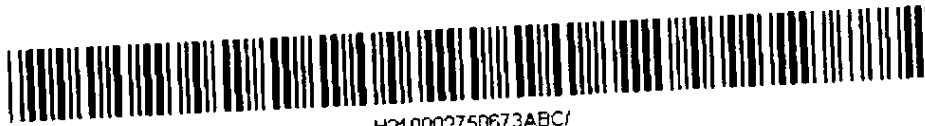
7/19/2021

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

L04000061770

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H21000275067 3)))



H210002750673ABC/

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

From: Account Name : 360 CORPORATE SOLUTIONS, LLC
Account Number : 120210000090
Phone : (305)529-5440
Fax Number : (305)529-5441

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

Email Address: vpineru@gemrtcpa.com

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TALLAHASSEE, FLORIDA

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MAOKIN, LLC

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Corporate Filing Menu

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BB
7/20/21

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MAOKIN, 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 08/19/2004 and assigned
Florida document number 104000061770.

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:

New Registered Office Address:

Enter Florida street address

City, Florida 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.

If 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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	MAOKIN C.A.	3945 S.W. 188th Avenue	<input type="checkbox"/> Add
		Miramar, FL 33029	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Edwards Siher	3945 S.W. 188th Avenue	<input type="checkbox"/> Add
		Miramar, FL 33029	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
MGR	Ana Ofelia Fung Chiu	3945 S.W. 188th Avenue	<input type="checkbox"/> Add
		Miramar, FL 33029	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
DT	Corcy Fung Chiu	3945 S.W. 188th Avenue	<input type="checkbox"/> Add
		Miramar, FL 33029	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
DV	Fermin Fung Chiu	3945 S.W. 188th Avenue	<input type="checkbox"/> Add
		Miramar, FL 33029	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

STONE ISLAND
TAIL OF A SCOTCH
LOUNGE
PM 1:39

2021 JUL 19 PM 4:39
ST. JOHN'S COLLEGE
TALLAHASSEE, FLORIDA

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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.



Edwards Siher

Typed or printed name of signee

Filing Fee: \$25.00