## 205000032302

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## **COVER LETTER**

Div	ision of Corp	porations		•		
SUBJECT:		en & Luong LLC				
SUBJECT.		Name of Limi	ted Liability Company			
The enclosed	d Articles of A	Amendment and fee(s) are sub-	nitted for filing.			
Please return	ali correspoi	ndence concerning this matter t	to the following:			
		Thuong Trinh				
			Name of Person			
			Firm/Company			
		10107 Wittenberg Way				
			Address			
		Orlando, FL 32832				
			City/State and Zip Code			
		tontrinh1@gmail.com			<i>(</i> 2)	
		E-mail address: (t	o be used for future annual report notif	ication)	Ö	
For further in	nformation co	oncerning this matter, please ca	11:		63	
Krystle Gill	am		800 375-2453		©)	5,75
	Name of	Person	Area Code Daytime	Telephone Number		500
Enclosed is	a check for the	e following amount:			51.12: 0.7	ME
<b>■ \$25.00 I</b>	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 \$ta Certified Copy (additional copy is e	itus &	

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

TO:

Registration Section

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

Trinh Nguyen & Luong LLC		
( <u>Name of the Limited Liability</u> (A Florida L	Company as it now appears on our records.) imited Liability Company)	
The Articles of Organization for this Limited Liability Cor	upany were filed on 04/04/2005	and assigned
Florida document number L05000032302		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limite	ed liability company here:	
The new name must be distinguishable and contain the words "Limite	d Liability 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 ADDRE	(S.S)	
		<u> </u>
Enter new mailing address, if applicable:		g g
Mailing address MAY BE A POST OFFICE BOX)		<u> </u>
		17. 17. 17.
<ol> <li>If amending the registered agent and/or registeregistered agent and/or the new registered office addre</li> </ol>		nter the name of the me
Name of New Registered Agent:	100	<del></del>
New Registered Office Address:		
	Enter Florida street address	
·	Floric	la
	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.

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>	Address	Type of Action
MGRM	THUOUNG H NGUYEN	10107 WITTENBERG WAY	
		ORLANDO, FL 32832	■ Remove
			☐ Change
MGRM	Penguin Peak, LLC	200 W. 34th Ave. #977	■ Add
		Anchorage, AK 99503	
			-
			Change
			Add
			☐ Change
			Add
			Remove
			□ Change
			☐ Remove
		·	Change
			_ □ Remove
			☐ Change

D. If am	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	· · · · · · · · · · · · · · · · · · ·
	<del></del>
Note:	ive date, if other than the date of filing:
(b) The	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m., on the earlier of: 90th day after the record is filed.
Dated	1/30 2000
	Signature of a member or anyhorized representative of a member
	Penguin Peak, LLC by Thuong Trinh, Momber

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Typed or printed name of signee

Filing Fee: \$25.00