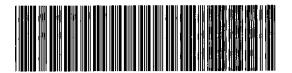
## L05000017540

(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						
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L. SELLERS						
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## COVER LETTER

TO: Registration Sec Division of Corp	
SUBJECT: K.	F. U. O. INVESTMENTS LLC  Name of Limited Liability Company
The enclosed Articles of A	amendment and fee(s) are submitted for filing.
Please return all correspor	dence concerning this matter to the following:
	KWOK, HELEN EMILY Name of Person
	K.F.U.O. INVESTMENTS, LLC.
	P.O. BOX 9449  Address
	BRADENTON FL 34206 City/State and Zip Code
	E-mail address: (to be used for future annual report notification)
	ncerning this matter, please call:
KwoK H	Person Area Code & Daytime Telephone Number
Enclosed is a check for the	following amount:
\$25.00 Filing Fee	S30.00 Filing Fee & S55.00 Filing Fee & S60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed)  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

( <u>Name of the Limited 1</u> (A	<b>Liability Company as it now</b> Florida Limited Liability Com	appears on our re ipany)	ecords.)	
The Articles of Organization for this Limited Lia Florida document number <u>Lo Socoo 475</u>	nbility Company were filed o	on May 13	, 200	<u></u> and assigned
This amendment is submitted to amend the follow	wing:			
A. If amending name, enter the new name of   The new name must be distinguishable and end with				
The new name must be distinguishable and end with "L.L.C."	the words "Limited Liability	Company," the de-	signation "L	LC" or the abbreviation
Enter new principal offices address, if applica	ble:			
(Principal office address MUST BE A STREET	ADDRESS)			
B. If amending the registered agent and/or registered agent and/or the new registered offi	r registered office addres	s on our record	ls, <u>enter tl</u>	ne name of the new
Name of New Registered Agent:	KwoK , I	HELEN I	EMILY	,
New Registered Office Address:	7050 S.	KIRKMI	4~	ROAD
	501 + 15	Enter Florida	street addr	ess O
	ORLANDO City	, F	lorida	7in Code
New Registered Agent's Signature, if changing Re				Zip Couc
I hereby accept the appointment as registered the provisions of all statutes relative to the pro accept the obligations of my position as regist	oper and complete perforn	nance of my dutie	es, and $ ilde{I}$ ar	n familiar with and

If Changing Registered Agent, Signature of New Registered Agent

heing filed to merely reflect a change in the registered office address. I hereby continue that the limited liability

company has been notified in writing of this change.

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member <u>Title</u> Name Address Type of Action MGRM LIANG, YINGZHUO 7050 S. KIRKMAN ROAD Add ORLANDO, FL 32819 Remove

MGRM KWOK, HELEN EMILY 7050 S. KIRKMAN ROAD Add ORLANDO, FL 32819 Remove Remove Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated June 3 Signature of a member of authorized representative of a member

Page 2 of 2

Filing Fee: \$25.00