## L00000101061

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SECRETARY OF STATE
STYLESION OF CORPORATIONS

J. BRYAN

JUL 2 9 2008

**EXAMINER** 

## **COVER LETTER**

TO: Registration S Division of Co				
SUBJECT: Hsu Er	nterprise Group, LLC			•
	(Name of Lim	ited Liability Company)		
	Amendment and fee(s) are sub	-		
	Christopher T. Graham,			
		(Name of Person)	08 JUL 28	10 TO
	The Private Client law G	roup, PC		조습 유립자
		(Firm/Company)		SAL
	75 Fourteenth Street NE	Suite 2710	PH 2: 19	공유 유오
		(Address)	2: 1	크음
			ŵ.	SHI
	Atlanta, GA 30309			
		(City/State and Zip Code)		
For further information	concerning this matter, please c	all:		
Christopher T. Grahar	n, Esq.	at ( 404 ) 974-3484		
	of Person)	at ( 404 ) 974-3484  (Area Code & Daytime T	elephone Number)	
Enclosed is a check for t	the following amount:			
☑ \$25.00 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 Status & Certified Copy (additional copy is enclosed	l)
Regist Divisi P.O. B	JING ADDRESS: ration Section on of Corporations tox 6327 assee, FL 32314	STREET/COURIER Registration Section Division of Corporation Clifton Building 2661 Executive Center	ns	

Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

Hsu Enterprise Group, LLC		our records.)
( <u>Name of the Limited</u> (A	Liability Company as it now appears on of Florida Limited Liability Company)	ur records.)
The Articles of Organization for this Limited Li Florida document numberL06000101061	ability Company were filed on October	17, 2006 and assigned
This amendment is submitted to amend the follo	owing:	
A. If amending name, <u>enter the new name of</u>	the limited liability company here:	
The new name must be distinguishable and end wit "L.L.C."	h the words "Limited Liability Company," t	he designation "LLC" or the abbreviation
Enter new principal offices address, if applic	able:	
(Principal office address MUST BE A STREE	T ADDRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE)	<u>BOX)</u>	
		- W.F.
B. If amending the registered agent and/orthe new registered of		ecords, enter the name of the nev
Name of New Registered Agent:	·	
New Registered Office Address:	(Enter F	lorida street address)
	·	, Florida
	(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 608. 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.

(City)

(If Changing Registered Agent, Signature of New Registered Agent)

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>	<u>Name</u>	Address	Type of Action
MGRM_	Ming Lam	10105 Doty Avenue Unit # A Inglewood, CA 90303	Add Remove
MGRM	Ming H. Lam	182-17 150th Drive Jamaica, NY 11413	Add Remove
		Add Remove	
			Add Remove
			Add Remove
			Add Remove
D. If ame	July 23	n, enter change(s) here: (Attach additional sheets, if necessary)	SECRETARY OF STATE SIVISION OF CORPORATIONS  08 JUL 28 PM 2: 19  E
	Signa	Christopher T. Graham, Esq.  Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00