L070000 67676

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

Office Use Only



600344864016

05/28/20--01010--027 ++25.00

S TALLENT JUN 1 6 2020 TOZOHAY 23 PH L: 50

Am

COVER LETTER

.

TO:

Registration Section

Division of Corporations					
	TIGER LLC				
SUBJECT:	Name of Lin	nited Liability Company	·		
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
		Name of Person			
	DRAGON TIGER LLC				
	Firm/Company				
	8793 TAMIAMI TRAIL EAST UNIT 120				
		Address			
	NAPLES, FL 34113				
	ELIDA CLA DEOCCALEDA ANC	City/State and Zip Code			
	EURASIARESTAURANT	@YAHOO.COM (to be used for future annual report no	fitherian		
For further information c	oncerning this matter, please o	·	· · · · · · · · · · · · · · · · · · ·		
ALFONSO MANCINI		239 877-9809			
Name of Person		at () Area Code Daytii	me Telephone Number		
		·	·		
Enclosed is a check for the	ne 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)		
Mailing Addres Registration S	Section	Street Address: Registration So			
Division of Corporations		Division of Corporations			
P.O. Box 6327 Tallahassee, FL 32314		The Centre of Tallahassee 2415 N. Monroe Street, Suite 810			

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

DRAGON TIGER, LLC.		
(<u>Name of the Limited Liab</u> (A Flori	lity Company as it now appears on our records.) da Limited Liability Company)	
The Articles of Organization for this Limited Liability	Company were filed on 6/27/2007	and assigned
Florida document number L07000067676	·	
his amendment is submitted to amend the following:		
a. If amending name, enter the new name of the lin	mited liability company here:	
he new name must be distinguishable and contain the words "Li	mited Liability Company," the designation "LLC" o	r the abbreviation "TalC."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADD	DRESS)	MAY 28
		P
		<u>.</u>
Enter new mailing address, if applicable:		L: 55
Mailing address MAY BE A POST OFFICE BOX)		
3. If amending the registered agent and/or register	ed office address on our records, enter th	e name of the new regis
gent and/or the new registered office address here:	:	
Name of New Registered Agent:		
New Registered Office Address:		
New Hegisteled office Address.	Enter Florida street address	
	. Flori	ida
	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 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	MANCINI, ETTORE	5581 WENDY LANE	□Add
		NAPLES, FL 34112	■Remove
			□Change
			□Add
			□Remove
			□Change
			🗆 Add
			□Remove
			□Change
			□ Add
			□Remove
			□Change
			□Add
			Remove
			Change
			□Add
			□Remove
			□ Change

						.,		
								
								_
								-
								-
	<u>.</u>			_				
		,						
	<u> </u>							
								-
		-			.			
ote: If the	ite, if other than date is listed, the date date inserted in thi effective date on th	is block does no	ot meet the app	licable statutor	ng or more than 9 y filing require	(optional) days after tiling ments, this date) 3.) Pursuant to 605 2 will not be list	5.0207 ed as
ecord spec is filed.	ifies a delayed effe	ective date, but i	not an effective	e time, at 12:01	a.m. on the ea	dier of: (b) T	he 90th day afte	r the
MAY ted	23		2020					
.cu			_ ·	·				
			Cho	`				
			a member or au					

Filing Fee: \$25.00