01/04

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name

: THE LEE LAW FIRM, P.L.

Account Number : I20070000039 Phone

: (407)550-0368

Fax Number

: (305) 375-8050

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

Tiec (o)

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN FORTUNA DEVELOPMENT GROUP, LLC

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Page Count	04
Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu

Help

J. BRYAN

MAR 1 5 2012

EXAMINER

(((H120000679393)))

COVER LETTER

***			COVER DEXTE	LV	
TO:	Registration Se Division of Cor				
SUBJE	CT:	FORTUNA DE	VELOPMENT GRO	UP, LLC	
		Name of	Limited Liability Company		
The enc	closed Articles of	Amendment and fec(s) are	e submitted for filing.		
Please r	etum all correspo	ondence concerning this m	atter to the following:		
			Robert Q. Lee		TALLAHASSEE, FLORIGE
		_	Name of Person		
			Diaz, Reus & Targ, L	LP	HAN S
			Firm/Company		第0 英 [
		121 S	outh Orange Avenue,	Suite 1270	7:57
			Address		22 00
			Orlando, Florida 328	01	7
			City/State and Zip Code		
			rlee@diazreus.com	1	
		E-mail addre	ess; (to be used for future armual	report notification)	
For furt	her information o	concerning this matter, plea	ase call:		
	Ro	obert Q. Lee	at (_407_)	550-0368	
**	Name o	of Person		e & Daytime Telephone Number	<u> </u>
Enclose	d is a check for t	he following amount:			
[7] \$25.	00 Filing Fee	\$30.00 Filing Fee &	\$55.00 Filing Foe &	\$60.00 Fili	og Fee.

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(additional copy is enclosed)

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Certificate of Status

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

Certificate of Status &

(additional copy is enclosed)

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Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

4079999495

(((H120000679393)))

ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION OF

WILLED TO THE TOTAL THE TOTAL TO THE TOTAL T

FURTUNA DEVELOP		
(Name of the Limited Liability Comna (A Florida Limited L	iy as it now appears on our records lability Company)	3)
The Articles of Organization for this Limited Liability Company	were filed onAugust 23, 20	007 and assigned
Florida document number L07000086384 .		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and end with the words "Limit" L.L.C."	ted Liability Company," the designati	on "LLC" or the abbreviation
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 off registered agent and/or the new registered office address here		ter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		

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

Enter Florida street address

. Florida

MGR = Manager

[[H12000067939.3]])
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:

MGRM = Managing Member Type of Action Title Name <u>Address</u> MGR WANG, DAQING 1621 RIVER BIRCH AVENUE DbA [√] OVIEDO FL 32765 US Remove ☐ Add ☐ Remove ∏Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Signature of a member or authorized representative of a member Robert Q. Lee Typed or printed name of signoe

Page 2 of 2

Filing Fee: \$25.00