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COVER LETTER

TO:	Registration S Division of Co			. •
SUBJE	·CT·	CHINE	SETEACULTURE LLC	
30001	<u></u>	Name of Lim	ited Liability Company	
The en	clósed Articles o	of Amendment and fee(s) are sul	omitted for filing.	4
Please	return all corres	pondence concerning this matter	r to the following:	2
			CHRISTINE CHEW	12 FEB 16 AM
			Name of Person	7
		CHRISTIN	E CHEW & ASSOCIATES INC	
			Firm/Company	
			539 N MILLS AVE	
			Address	
		(ORLANDO, FL 32803	
			City/State and Zip Code	<u> </u>
For fur	ther information	E-mail address: (concerning this matter, please	to be used for future annual report notification)	
	СНІ	RISTINE CHEW	at (_407_)894-725	9
	Name	of Person	Area Code & Daytime Telephone	Number
Enclose	ed is a check for	the following amount:		
▼\$ 25	5.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	Certified Copy (additional copy is enclosed)	0.00 Filing Fee, ertificate of Status & ertified Copy additional copy is enclosed)
	Regis Divis P.O.	LING ADDRESS: stration Section sion of Corporations Box 6327 hassee, FL 32314	STREET/COURIER ADDR Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	ESS:

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

CHINESETEACULTURE LLC

(Name of the Limited (A	Liability Company as it now ap Florida Limited Liability Company	pears on our records.)	
The Articles of Organization for this Limited Li Florida document number		10/18/2007	and assigned
This amendment is submitted to amend the follo	owing:		
A. If amending name, enter the new name of	the limited liability company	here:	
CH	INESE TEA CULTURE LL	.C	
The new name must be distinguishable and end wit "L.L.C."	h the words "Limited Liability Co	mpany," the designation "l	LLC" or the abbreviati
Enter new principal offices address, if applica	able: N/A		
(Principal office address MUST BE A STREE	T ADDRESS)		
Enter new mailing address, if applicable:	N/A		•
Mailing address MAY BE A POST OFFICE	BOX)		
B. If amending the registered agent and/orthe new registered of		on our records, <u>enter 1</u>	the name of the n
Name of New Registered Agent:	HUANG, VIVIEN Z.		
New Registered Office Address:	477 WHITTINGHAM PL	Enter Florida street ada	Iress
	LAKE MARY		32746
	City	, Florida	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.

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 **Type of Action** Address Title Name N/A Remove Remove Remove Remove □Add Remove $\prod Add$ _____Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) N/A February 2nd Signature of a member or authorized representative of a member **VIVIEN Z. HUANG**

Page 2 of 2

Typed or printed name of signee

Filing Fee: \$25.00