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(Requ	jestor's Name)	
(Addr	ess)	
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(City/	State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Busi	ness Entity Nar	ne)
(Docu	ıment Number)	
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OFRIUCE

COVER LETTER

TO: Registration Se Division of Cor					
Liao Land /	A LLC				
SUBJECT:	Name of Lim	ited 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:			
	Yuh-Mei Hutt				
		Name of Person			
	Liao Land A LLC				
		Firm/Company			
	4089 Faulkner Ln				
		Address			
	Tallahassee, FL 32311				
	yuhmeihutt@gmail.com	City/State and Zip Code			
	E-mail address: (to be used for future annual report notific	cation)	2021 1.	
For further information c	concerning this matter, please c	all:		2007 1007	
Yuh-Mei Hutt		850 264-2538		_	
Name o	t Person	at () Area Code Daytime	Telephone Number		. 3
Enclosed is a check for the	he following amount:			2021 DCT 14 MH D: 29	, -
■ \$25,00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Certificate of Certified Co (additional co)	of Status &	
Mailing Addres	55:	Street Address:			

Registration Section
Division of Corporations
P.O. Box 6327 Tallahassee, FL 32314

Registration Section
Division of Corporations
The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Liao Land A LLC					
(Name of the Lim	ited Liability Compa (A Florida Limited l	ny as it now appears on our records.) Jability Company)			
The Articles of Organization for this Limited I	iability Company	were filed on November 26, 2007	and assi	igned	
Florida document number 1.07000117721	.				
This amendment is submitted to amend the fol	lowing:				
A. If amending name, enter the new name	of the limited liab	ility company here:			
The new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the designation "LLC" or t	he abbreviation "L.l	IC."	
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		4089 Faulkner Lu			
		Tallahassee, FL 32311			
Enter new mailing address, if applicable:		4089 Faulkner Ln Tallahassec, FL 32311			
(Mailing address MAY BE A POST OFFICE BOX)		rananassee, 11, 52,011			
B. If amending the registered agent and/or agent and/or the new registered office addre	• •	address on our records, enter the	name of the new		
Name of New Registered Agent:	Yuh-Mei Hutt			2021 OCT	
New Registered Office Address:	4089 Faulkner	L.n	۳.۲ چز	<u></u>	
		Enter Florida street address		3	
	Tallahassee		a 32314	<u> </u>	
		City	Zip Code	29	

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 Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	Ingshang Liao	2521 Mount Vernon Ln	□Add
		Tallahassee, FL 32311	□Remove
			■Change
AMBR	Fannie Huang	2851 Industrial Plaza Dr	□Add
		Tallahassee, FL 32301	■Remove
			□Change
MGR	Yuh-Mei Hutt	4089 Faulkner Ln	= Add
		Tallahassee, FL 32311	□Remove
			7021 OCT
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n effective date is list te: If the date ins	ther than the date of ted, the date must be spec- erted in this block does date on the Departme	cific and cannot es not meet the	applicable sta			ling.) Pursuant to	
ecord specifies a d is filed.	elayed effective date,	but not an effe	ective time, at	12:01 a .m. on t	ne earlier of: (b)	The 90th day a	ifter the
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	- 1/1						
nted <u>Octoba</u>		<u> </u>		 , •-			

Filing Fee: \$25.00