L08000047704

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SECRETARY OF STATE
DIVISION OF CORPORATIONS

T. HAMPTON

FEB 1 2 2009

EXAMINER

COVER LETTER

P.O. Box 6327

Tallahassee, FL 32314

TO: Registration S Division of Co			
SUBJECT: INNOV	ATION KITCHEN &	BATH, ST PE, LLC	D
- · · ·		ited Liability Company)	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspondent	ondence concerning this matter	to the following:	,
	MAYWA YEI	AL CD	
•		(Name of Person)	
	PRICE ACCOUNTING		
		(Firm/Company)	
	PO BOX 14508		
		(Address)	
	CLEARWATER, FL 3376	66-4508	
		(City/State and Zip Code)	
For further information of	concerning this matter, please c	all:	
MAYWA YEI		at (727) 669-2764	
(Name of Person)		(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)
Regist	ING ADDRESS: ration Section on of Corporations	STREET/COURIER Registration Section Division of Corporation	

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ININION	ハエコヘトコ	KITCHEN	POATH	OT DE	110
HVINCIV	AIIUN	VII CHEN	NY DAID.	31 FF.	111.

(Name of the Limited Liability Company as it now appears on our records.)

(A	Florida Limited L	iability Company)			
The Articles of Organization for this Limited Li. Florida document number L08000047704	an	and assigned			
This amendment is submitted to amend the follo	wing:				
A. If amending name, enter the new name of	the limited liab	ility company here:			
The new name must be distinguishable and end with "L.L.C."	n the words "Limi	ted Liability Company," the des	ignation "LLC" or	the abl	oreviation `
Enter new principal offices address, if applicable:		3100 22ND AVE N C		00	DV.
(Principal office address MUST BE A STREET ADDRES		ST PETERSBURG, FL 33	713-3704	FEB I	ECRETA ISION OF
Enter new mailing address, if applicable:		18843 US HWY 19 N		2	RY OF S CORPOR
(Mailing address MAY BE A POST OFFICE I	CLEARWATER, FL 33764		=	FATE ATTIONS	
B. If amending the registered agent and/or registered agent and/or the new registered of Name of New Registered Agent:	YAN (JOHN) I	<u>e</u> : HUANG	s, <u>enter the na</u>	me of	the new
New Registered Office Address:	18843 US HV		a street address)		
	CLEARWATE	•	lorida <u>33764</u>	Code)	
		1 = -97	'-4		

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)

Page 1 of

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> **Type of Action** <u>Name</u> Address MGR YAN (JOHN) HUANG 18843 US HWY 19 N ra Z Add Remove CLEARWATER FL 33764 □ Add Remove: 🗂 Add Remove □ AdJ Remove Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated FEBRUARY 9 2009 of a mamber or authorized representative of a member QI GUANG HUANG (MEMBER) Typed or printed name of signee

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Filing Fee: \$25,00