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## **COVER LETTER**

Registration Section

Tallahassee, FL 32314

TO:

Division of Cor	porations		
SUBJECT: TUYEN	FARMS, LLC		n
Sold Ect.		ited Liability Company)	-
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
	ondence concerning this matter	-	
	TUYEN PHAN NGUYEN		
		(Name of Person)	
	TUYEN FARMS, LLC		
		(Firm/Company)	<del></del>
	6906 SIMMONS LOOP		
		(Address)	
	RIVERVIEW, FL 33578		
	**************************************	(City/State and Zip Code)	<del></del>
For further information c	oncerning this matter, please c	all:	
ZASHA NGUYEN (DA	UGHTER)	at ( 813 ) 495-4958	
	of Person)	(Area Code & Daytime 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)
	ING ADDRESS:	STREET/COURIER	R ADDRESS:
	ration Section on of Corporations	Registration Section Division of Corporation	ons
P.O. B	ox 6327	Clifton Building	

2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



TUYEN FARMS, LLC		
(Name of the Limited Liability (A Florida L	Company as it now appears on our imited Liability Company)	r records.)
The Articles of Organization for this Limited Liability Co	ompany were filed on 02-23-09	and assigned
Florida document number L09000018047		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ted liability company here:	
The new name must be distinguishable and end with the word "L.L.C."	ds "Limited Liability Company," the	designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDR.	ESS)	
·		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered agent and/or the new registered office addr		ords, enter the name of the new
Name of New Registered Agent:	· · · · · · · · · · · · · · · · · · ·	
New Registered Office Address:		
	(Enter Flor	rida street address)
		, Florida
	(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 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 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>	<u>Name</u>	Address	Type of Action
MGR	NIEM K NGUYEN		Add Remove
MGR	TUYEN PHAN NGUYEN	6906 SIMMONS LOOP RIVERVIEW, FL 33578	Add Remove
	<del></del>		Add Remove
	**************************************		Add Remove
**************************************			. ☐ Add ☐ Remove
			Add Remove
D. If amendin	ng any other information, enter change(s	s) here: (Attach additional sheets, if necessary)	9FEB 27 AM
Dated	Elmay 24 , 2009	·	-
<del>-</del>	TUYEN PHAN NGUYEN	authorized representative of a member	<del></del>

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Filing Fee: \$25.00