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| (Re | equestor's Name) | |
|---|---------------------|-----------|
| (Ad | ldress) | |
| (Ad | ldress) | |
| (Ci | ty/State/Zip/Phone | #N |
| (0) | tyrotaterzipit none | ") |
| PICK-UP | ☐ WAIT | MAIL |
| (Bu | usiness Entity Nam | e) |
| | | |
| - (Dc | ocument Number) | |
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| Certified Copies | _ Certificates | of Status |
| Special Instructions to Filing Officer: | | |
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Office Use Only



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T. CLINE

.OCT 20 2010

EXAMINER

COVER LETTER

TO:

Registration Section **Division of Corporations**

nese Restaurant, LLC

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Pam Schoener

Please return all correspondence concerning this matter to the following:

| De Dong Liu Name of Berson |
|--|
| De Dry Fam/Company |
| Hury 281 & Coll Breeze Phuy Juice 373 |
| Gul Rivelze F1 32563 |
| E-mail address: (to be used for future annual report notification) |
| For further information concerning this matter, please call: |
| For further information concerning this matter, please call: BOLLE GULLEGUE at (450 377 - 9087 Name of Person Area Code & Daytime Telephone Number |
| Enclosed is a check for the following amount: |
| \$25.00 Filing Fee \$\ Certificate of Status \$\ Certificate of Status \& |
| MAILING ADDRESS: Registration Section Division of Corporations STREET/COURIER ADDRESS: Registration Section Division of Corporations |
| P.O. Box 6327 Tallahassee, FL 32314 Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 |

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| (Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company) | | | | | |
|--|--|--|--|--|--|
| The Articles of Organization for this Limited Liability Company were filed on 3-24-2009 and assigned Florida document number LOGODD2 & 314 | | | | | |
| 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 "Limi"L.L.C." | ited Liability Company," the designation "LLC" on the appreviation | | | | |
| Enter new principal offices address, if applicable: | same 55 5 | | | | |
| (Principal office address MUST BE A STREET ADDRESS) | mrs. | | | | |
| Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | Huy 281 - Gulf Breeze PKwy Suite 3731 Gulf Breeze F 32563 | | | | |
| B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: | | | | | |
| Name of New Registered Agent: | Dong Liu | | | | |
| New Registered Office Address: | Enter Florida street address 333 | | | | |
| 601 | Pive 1 7e Florida 3 2563 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 Changing Registered Agent, Signature of New Registered Ag

MGR = Manager

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 = Ma | naging Member | | |
|---------------|--|---|-----------------|
| Title | Name | Address | Type of Action |
| m6B. | Jian 6 Li | Tanama Cury Beach 3 | Add Remove |
| MGRM | De Dong lin | SOUTIHELL Drive Cresturen & 3253L | Add Remove |
| marm | Zai Y Lin | 5310 915th 5theet | Add Remove |
| | | | Add 22 |
| | | | Add 9 Remove |
| | | | Add 55 |
| D. If amendir | ng any other information, enter change | (s) here: (Attach additional sheets, if necessary.) | |
| | | n/a | _ |
| | | | _ |
| | | | _ |
| | | | |
| Dated | | | |
| | bornard | 104 | |
| | Signature of a member of DONG 1 | or authorized representative of a member | |
| | | r printed name of signee | |

Page 2 of 2

Filing Fee: \$25.00