C09000048825

(Re	equestor's Name)		
(Ad	ldress)		
(Ad	ldress)		
Ç . 			
(0)	101 1 17: 101	10	
(Cit	ty/State/Zip/Phone	· #)	
PICK-UP	☐ WAIT	MAIL	
(Bu	siness Entity Nam	ne)	
	,	,	
. (Do	cument Number)		
Certified Copies	Certified Copies Certificates of Status		
Special Instructions to	Filing Officer		
Opeoidi matraotiona to	r intig Cilices.		

Office Use Only



100162131091

10/26/09--01007--029 **25.00

2009 OCT 26 PM 1: 23

T. CLINE

OCT 2 7 2009

EXAMINER

· COVER LETTER

TQ: Registration S Division of Co				
SUBJECT: Oregon Miami Property 1 LLC				
	Name of Lim	ited Liability Company		
The enclosed Articles o	of Amendment and fee(s) are su	bmitted for filing.		
Please return all corresp	oondence concerning this matte	r to the following:		
		Cheung Lung Siu		
		Name of Person		
	-	Firm/Company		
	72	79 SW ASCOT COURT		
		Address		
	P	ORTLAND, OR 97225		
City/State and Zip Code chiaosiu@comcast.net E-mail address: (to be used for future annual report notification)				
		tion)		
For further information	concerning this matter, please of	eall:		26
che	eung Lung Siu	at (503) 3	36-4148	
Name	of Person	Area Code & Daytime 1	Celephone Number	7. 23
Enclosed is a check for	the following amount:			
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	Certified Copy (additional copy is enclosed)	\$60.00 Filing Certificate of Certified Co (additional of	of Status &

MAILING ADDRESS:

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

STREET/COURIER ADDRESS:

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Oregon Mi	ami Property 1 Ll	<u>_C</u>			
(<u>Name of the Limited Liability (</u> A Florida Li	n Miami Property 1 LLC bility Company as it now appears on our records.) ida Limited Liability Company)				
The Articles of Organization for this Limited Liability Co	mpany were filed on	May 19, 2009	and a	ssigned	1
Florida document numberL0900048825					
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limit	ed liability company be	ere:			
The new name must be distinguishable and end with the word: "L.L.C."	s "Limited Liability Comp	pany," the designation "L	LC" or th	e abbrev	riation
Enter new principal offices address, if applicable:			3150 6 60	and to	
(Principal office address MUST BE A STREET ADDRE	<u> </u>		2 (1)		.* :*
			<u>李</u> 高	<u> </u>	- Andread State
				26	ا ا
Enter new mailing address, if applicable:			213-63	-0	F. (
(Mailing address MAY BE A POST OFFICE BOX)			ξ''' (x'		
			**************************************	~	
			****	ယ	
B. If amending the registered agent and/or registered agent and/or the new registered office addresses		our records, enter th	e name	of the	new
Name of New Registered Agent:	······································				
New Registered Office Address:					
	E	nter Florida street addr	ess		
		, Florida			
	City		Zip Co	de	

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 **Title** Name <u>Address</u> **Type of Action MGRM** Xiu Ju Zhao 11612 NW 69 Terrace ☐ Add Doral, FL 33178____ Remove ☐ Add Remove ☐ Add Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) oct. ol Dated _ Signature of a member or authorized representative of a member CHEUNG LUNG

Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00