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| (R | equestor's Name) | | | | |
|---|---------------------|-----------|--|--|--|
| (Address) | | | | | |
| (A | ddress) | | | | |
| (C | ity/State/Zip/Phone | #) | | | |
| PICK-UP | ☐ WAIT | MAIL | | | |
| (B | usiness Entity Nam | ne) | | | |
| (Document Number) | | | | | |
| Certified Copies | Certificates | of Status | | | |
| Special Instructions to Filing Officer: | | | | | |
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Office Use Only



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D. BRUCE

JAN - 4 2010

EXAMINER

COVER LETTER

| `TO: Registration of | on Section Corporations | | | |
|------------------------|--|---|-------------------------------|-----------------------------------|
| SUBJECT: | SHT M | anagement LLC | | |
| 3000ECT. | | nited Liability Company | | |
| The enclosed Article | es of Amendment and fee(s) are so | abmitted for filing. | | |
| Please return all corr | respondence concerning this matte | er to the following: | | |
| | | Chang Yu Chiao | | |
| | | Name of Person | | |
| | SHT Management LLC | | | |
| | | Firm/Company | | • |
| | | 7279 SW Ascot Ct | | |
| | | Address | | £8 8 |
| | | Portland, OR 97225 | | |
| | | City/State and Zip Code | | EC 31 PM ETARY OF HASSEE, F |
| | F.mail address: | chiaosiu@comcast.net (to be used for future annual report notion | fication) | मा इस् |
| For further informat | ion concerning this matter, please | · | , | DEC 31 PH LE- 45 AHASSEE, FLOAM |
| | Chang Chiao | at (_503_) | 336-4148 | |
| Na | nne of Person | | ne Telephone Number | |
| Enclosed is a check | for the following amount: | | | |
| \$25.00 Filing Fe | S30.00 Filing Fee & Certificate of Status | S55.00 Filing Fee & Certified Copy (additional copy is enclosed | d) Certified | te of Status & |
| Ro Di P. | All.ING ADDRESS: egistration Section vision of Corporations O. Box 6327 Illahassee, FL 32314 | STREET/COUR Registration Section Division of Corpo Clifton Building 2661 Executive Co Tallahassee, FL 32 | on rations enter Circle | |

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| SHT Mana | gement LLC | | <u>.</u> | |
|--|--|-----------------------------|-------------------------|--|
| (<u>Name of the Limited Liability Comp</u> (A Florida Limited | pany as it now appea Liability Company) | rs on our records.) | | |
| The Articles of Organization for this Limited Liability Compar Florida document numberL0900071124 | | | and assigned | |
| This amendment is submitted to amend the following: | | | | |
| A. If amending name, enter the new name of the limited lia | ibility company her | r <u>e</u> : | | |
| The new name must be distinguishable and end with the words "Lit "L.L.C." | mited Liability Compa | any," the designation "L | LC" or the abbreviation | |
| Enter new principal offices address, if applicable: | | <u> </u> | £ 8 | |
| (Principal office address MUST BE A STREET ADDRESS) | | | | |
| Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | | See Fig. | SI PRID | |
| B. If amending the registered agent and/or registered registered agent and/or the new registered office address he | | our records, <u>enter t</u> | ne name of the nev | |
| Name of New Registered Agent: | | , | | |
| New Registered Office Address: | En | nter Florida street addı | ress | |
| | | , 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 Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager</u> or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member Type of Action <u>Address</u> **Title Name** MGR Ray Siu Remove Hui Cao MGR 6901 22nd Ave North STE #VC-2 ✓ Add St Petersburg, FL 33710 Remove ☐ Add ☐ Remove \square Add Remove $\prod \Lambda dd$ Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessar Chang Zu Chas

Signature of a member or authorized representative of a member CHANG YU CHIAD

Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00