

L110000071147

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(Address)

(Address)

(City/State/Zip/Phone #)

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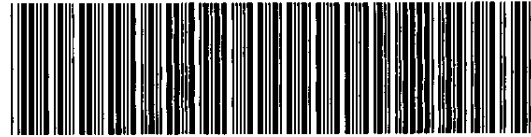
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
11 JUL -8 AM 11:39

T. HAMPTON

JUL 11 2011

EXAMINER

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Oaksville Properties, LLC
Name of Limited Liability Company

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

Please return all correspondence concerning this matter to the following:

Jingrong Liu

Name of Person

Oaksville Properties, LLC

Firm/Company

P. O. Box 195

Address

Oldsmar FL 34677

City/State and Zip Code

jackrliu@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jingrong Liu

Name of Person

at (813)

600-8325

Area Code & Daytime Telephone Number

Enclosed is a check for 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)

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**

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

11 JUL -8 AM 11:39

Oaksville Properties, LLC

(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 07/01/2010 and assigned
Florida document number L10000071147.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

12403 Maidstone Ct.

(Principal office address MUST BE A STREET ADDRESS)

Odessa, FL, US, 33556

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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:

Jingrong Liu

New Registered Office Address:

12403 Maidstone Ct.

Enter Florida street address

Odessa

, Florida

33556

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, 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>	<u>Address</u>	<u>Type of Action</u>
MGR	Li Zhang	24613 SE 9th Pl Sammamish, WA 98074	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	Jingrong Liu	12403 Maidstone Ct. Odessa, FL 33556	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	Yujun Wu	19409 Sandy Springs Circle Lutz, FL 33558	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	Min Zhang	19409 Sandy Springs Circle Lutz, FL 33558	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

11 JUL - 8 AM 11:39

SECRETARY OF STATE
DIVISION OF CORPORATIONS

Dated 07/02/2011

Signature of a member or authorized representative of a member

Yujun Wu, Min Zhang
Typed or printed name of signee