# #1/1000/03/57

| (Re                     | equestor's Name)   |           |
|-------------------------|--------------------|-----------|
| (Ac                     | ldress)            |           |
| (Ac                     | ddress)            |           |
| (Ci                     | ty/State/Zip/Phone | e #)      |
| PICK-UP                 | WAIT               | MAIL      |
| (Ви                     | usiness Entity Nan | ne)       |
| (Do                     | ocument Number)    |           |
| Certified Copies        | Certificates       | of Status |
| Special Instructions to | Filing Officer:    |           |
|                         |                    |           |
|                         |                    |           |
|                         |                    |           |
|                         |                    |           |





700242904407

12/27/12--01003--006 \*\*25.00

FILED
12 DEC 26 PM 5: 26
SECRE JARY OF SLATE
FAIL HASSEE: FLORIDA

K.SALY EXAMINER DEC 31 2012

## **COVER LETTER**

TO: Registration Section
Division of Corporations

..... WINDERTING INVESTMENTS 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:

| KWOK,HELEN EMILY        |  |
|-------------------------|--|
| Name of Person          |  |
|                         |  |
| Firm/Company            |  |
| 4141 S FLORIDA AVE.     |  |
| Address                 |  |
| LAKELAND,FL 33813       |  |
| City/State and Zip Code |  |
|                         |  |

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

For further information concerning this matter, please call:

# KWOK, HELEN EMILY

at (863)647 3000

Name of Person

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)

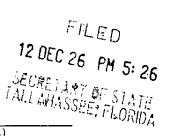
□\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

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



### WINDERTING INVESTMENTS 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 Lia  | bility Company w    | vere filed on Septemb     | er 9,2011              | and assigned        |
|--|---------------------|---------------------------|------------------------|---------------------|
| Florida document number L11000103157   | <u> </u>            |                           |                        |                     |
| This amendment is submitted to amend the follow  | wing:               |                           |                        |                     |
| A. If amending name, enter the new name of   | the limited liabili | ity company here:         |                        |                     |
| The new name must be distinguishable and end with "L.L.C."                                 | the words "Limite   | d Liability Company," the | designation "LLC       | or the abbreviation |
| Enter new principal offices address, if applica  | ble:                |                           |                        |                     |
| (Principal office address MUST BE A STREET   | ADDRESS)            |                           |                        |                     |
|  |                     |                           | <u> </u>               |                     |
| Enter new mailing address, if applicable:  |                     |                           | ·                      |                     |
| (Mailing address MAY BE A POST OFFICE B  | (OX)                |                           |                        |                     |
|  | <u> </u>            |                           |                        |                     |
| B. If amending the registered agent and/or registered agent and/or the new registered offi |                     |                           | ords, enter the        | name of the new     |
| Name of New Registered Agent:  | KWOK, HEL           | EN EMILY                  |                        |                     |
| New Registered Office Address:   | 4141 S FLOI         | RIDA AVE.                 |                        |                     |
|  |                     | Enter Flor                | ida street address     | •                   |
|  | LAKELAND            |                           | _, Florida <u>3381</u> | 3                   |
|  |                     | City                      | 2                      | 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 or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member

| <u>Title</u> | <u>Name</u>      | Address             | Type of Action |
|--------------|------------------|---------------------|----------------|
| MGRM         | LIANG,YINGZHUO   | 4141 S FLORIDA AVE. | Add            |
|              |                  | LAKELAND,FL 33813   | Remove         |
| MGRM         | KWOK,HELEN EMILY | 4141 S FLORIDA AVE. |                |
|              | •                | LAKELAND,FL 33813   | Remove         |
|              |                  |                     | Add Remove     |
|              |                  |                     | Add            |
|              |                  |                     | Add Remove     |
|              |                  |                     | Add Remove     |

| If amendi   | ng any other informati | on, enter change(s) here: (Attach ac dition      | al sheets, if necessary.) |
|-------------|------------------------|--|---------------------------|
|             |                        |  |                           |
|             |                        |  |                           |
| <del></del> |                        |  |                           |
|             | -                      |  |                           |
|             |                        |  |                           |
| ed Dec      | ember 21               | 2012   | ,                         |
|             |                        |  |                           |
| _           | . //                   | wure of a member or authorized representative of | of a member               |
|             | KWOK, HELEŃ            | EMILY  |                           |
|             |                        | Typed or printed name of signed                  | •                         |

Page 3 of 3

- Filing Fee: \$25.00