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(Re	equestor's Name)	
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COVER LETTER

то:		ration Sect on of Corpo					
C140 104		rinh Tran Ll	LC				
SUBJE	∪ Г і "		Name of Limi	ted Liability Company			
The enc	losed A	rticles of Ar	mendment and fec(s) are subr	nitted for filing.			
Please r	eturn al	l correspond	lence concerning this matter t	o the following:			
			Phu P. Tran				
				Name of Person			
			Trinh Tran LLC				
				Firm/Company			
			2 S. Blue Angel Parkway				
				Address			
			Pensacola, Fl. 32506				
				City/State and Zip Code		1	
			tran081509@gmail.com			2016 2016	
			E-mail address: (1	o be used for future annual report notification	n)		T
For furt	her info	ormation cor	ocerning this matter, please ca	ill:		ASS.	
Phu P.	Tran			321 525-1930		o P	m
		Name of I	Person	Area Code Daytime Telep	phone Number	P STATE	U
Enclose	ed is a c	heck for the	following amount:			G G	
\$25	.00 Fill	ng Fee	☐ \$30,00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	e 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

Trình Tran LLC			
(Name of the Limi	ted Liability Company a	s it now appears on our records lity Company)	3)
	(A Florida Latilited Claus	my Company?	
The Articles of Organization for this Limited L	iability Company wer	e filed on 11/07/2011	and assigned
Florida document number L11000126387	*		
This amendment is submitted to amend the following	owing:		
A. If amending name, enter the new name of	f the limited liability	company here:	
The new name must be distinguishable and contain the v	vords "Limited Liability C	ompany," the designation "LLC"	or the abbreviation "L.L.C."
Enter new principal offices address, if applic	able:	**	
(Principal office address MUST BE A STREE	TADDRESS)		
		·	
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE	<u>BOX)</u>	<u> </u>	

			2016
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 o	ffice address here:		20000073
	•		
Name of New Registered Agent:	Phu P. Tran		
New Registered Office Address:	2 S. Blue Angel Par		
		Enter Florida street address	5
	Pensacola	Flo	rida <u>32506</u>
		City	7in 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 605, 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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Duc T. Trinh		□ Add
		2 S. Blue Angel Parkway, Pensacol	■ Remove
			☐ Change
			Add
			☐ Remove
			Change
	4		
			☐ Remove
			□ Change
			TALLAHASSES:
			SEC.4-TOKIDS
		***************************************	□ Remove
			Change
			□ Remove
			□ Change

Duc T.	Trink is no lo	iger a Registe	red Agen	t or MGR	for Trinh T	ran LLC. F	lease rem	ove his na	me from t	he
Register	red Agent and	MGR.								

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Typed or printed name of signee

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