L12000019981

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			





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02/14/13--01015--016 **25.00

SECRETARY OF STATE TALLAHASSEE, FLORIDA

COVER LETTER

TO:

Registration Section
Division of Corporations

SUBJECT

PAN AMERICAN VENTURE FUND 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:

GLORIA GUO CPA

Name of Person

GLORIA GUO & ASSOCIATES CPA PA

Firm/Company

9200 BELVEDERE ROAD SUITE 103

Address

WEST PALM BEACH, FL 33411

City/State and Zip Code

GLORIAGUOCPA@YAHOO.COM

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

For further information concerning this matter, please call:

GLORIA GUO CPA

{at (}561,383-8388

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**

FILED 2013 FEB 14 AH 11: 50

SECRETARY OF STATE TALLAHASSEE, FLORIDA

PAN AMERICAN VENTURE FUND 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 I Florida document number <u>L12000019981</u>		were filed on 2/9/2	2012 and assigned
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name	of the limited liab	ility company here:	
The new name must be distinguishable and end w "L.L.C."	ith the words "Limit	ted Liability Company	," the designation "LLC" or the abbreviation
Enter new principal offices address, if appli	cable:		
(Principal office address MUST BE A STRE	ET ADDRESS)	All the second s	
Enter new mailing address, if applicable:		8643 YELLOV	/ ROSE CT
Enter new maining address, it applicable: (Mailing address MAY BE A POST OFFICE BOX)		BOYNTON BEACH, FL 33473	
B. If amending the registered agent and registered agent and/or the new registered or	or registered off	fice address on ou	r records, enter the name of the new
Name of New Registered Agent:	GLORIA GL	JO CPA	
New Registered Office Address:	9200 BELVEDERE ROAD SUITE 103		
	Enter Florida street address		
	WEST PAL	M BEACH	, Florida <u>33411</u>
Now Designated Amends Classes (C. 1)	D 1. 1.	City	Zip Code
New Registered Agent's Signature, if changing	Registered Agent:		
I hereby accept the appointment as registere the provisions of all statutes relative to the p accept the obligations of my position as reg	proper and compl	ete performance of	my duties, and I am familiar with and

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 <u>T</u>	Type of Action
MGR	JINGMING YU	70 LITTLE WEST ST 16G	Add
		NEW YORK, NY 10004	Remove
MGR	MONICA SHANG	8643 YELLOW ROSE CT	- _ ✓ Add
		BOYNTON BEACH,FL 33473	Remove
			Add
			Remove
			Add
			Remove
			Add
			Remove
			Add
			Remove

If amending any other information,	enter change(s) here: (Attach additional sheets, if necessary.)
NOVEMBER 28	2012
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	> son lang
LIAN WANG	e of a member or afthorized representative of a member
	Typed or printed name of signce

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2018 FEB 14 AN II: 50 SECRETARY OF STATE