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EXAMINER



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09/17/12--01010--011 **30.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
12 SEP 17 AM 8:15

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: TOP SHIPPING USA 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:

FILED STATE
SECRETARY OF CORPORATIONS
12 SEP 17 AM 8:15
DIVISION OF CORPORATIONS

TAIPING CAO
Name of Person

TOP SHIPPING USA LLC
Firm/Company

6904 NORTH KENDALL DRIVE # F303
Address

MIAMI, FL 33156
City/State and Zip Code

taipingcao@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

TAIPING CAO at (**305**) **778 6289**
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

TOP SHIPPING USA LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
12 SEP 17 AM 8:15

The Articles of Organization for this Limited Liability Company were filed on 03/05/2012 and assigned
Florida document number L12000031157

This amendment is submitted to amend the following:

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

TP GLOBAL LLC

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:

6904 NORTH KENDALL DRIVE

(Principal office address MUST BE A STREET ADDRESS)

APT. # F303

MIAMI FL 33156

Enter new mailing address, if applicable:

6904 NORTH KENDALL DRIVE

(Mailing address MAY BE A POST OFFICE BOX)

APT. # F303

MIAMI FL 33156

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:

TAIPING CAO

New Registered Office Address:

6904 NORTH KENDALL DRIVE APT. # F303

Enter Florida street address

MIAMI

, Florida

33156

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>
MGRM	TAIPING CAO	6904 NORTH KENDALL DRIVE APT # E303 MIAMI FL 33156	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input 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.)

Dated 10TH SEPTEMBER, 2012

/s/ TAIPING CAO
 Signature of a member or authorized representative of a member
TAIPING CAO
 Typed or printed name of signee