

# L13000092118

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To:

Division of Corporations  
Fax Number : (850) 617-6383

From:

Account Name : RACHEL SIU  
Account Number : 120010000073  
Phone : (407) 679-2433  
Fax Number : (407) 671-4352

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DIVISION OF CORPORATIONS  
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**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

**Email Address:** \_\_\_\_\_

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN FOUR SEASONS OF WINTER HAVEN, LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

SEP 05 2014  
J. HARRIS

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DIVISION OF CORPORATIONS  
BUREAU OF COMMERCIAL  
INFORMATION SERVICES

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Four Seasons of Winter Haven, 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:

Rachel Siu

Name of Person

Siu & Zanowick, CPAs

Firm/Company

5100 Old Howell Branch Road

Address

Winter Park, FL 32792

City/State and Zip Code

rsiu888@gmail.com

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

For further information concerning this matter, please call:

Rachel Siu

Name of Person

at 407 679-2433

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**

**Four Seasons of Winter Haven, 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 6/26/13 and assigned  
Florida document number L13000092118

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 "LLC"

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

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:

Yi Guo Chen

New Registered Office Address:

144 N Rifle Range Rd

Enter Florida street address

Winter Haven

City

Florida 33880

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 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.*

X *Yi Guo Chen*  
If Changing Registered Agent, Signature of New Registered Agent

**If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:**

**MGR = Manager**

**AMBR = Authorized Member**

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
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<u>MGR</u>	<u>Yi Guo Chen</u>	<u>144 N Rifle Range Rd</u>	<input type="checkbox"/> Add
		<u>Winter Haen, FL 33880</u>	<input type="checkbox"/> Remove

MGR	Yong Hui Chen	3006 Buckeye Point St	<input type="checkbox"/> Add
		Winter Haven, FL 33881	<input checked="" type="checkbox"/> Remove

☐ Add ☐ Remove

FILED	SECRETARY OF STATE	INVESTIGATION	ADD
<input checked="" type="checkbox"/>	SEP 11	PH 1:20	<input checked="" type="checkbox"/>
<input type="checkbox"/>	Remove		<input type="checkbox"/>
<input type="checkbox"/>	Remove		<input type="checkbox"/>
<input type="checkbox"/>	Remove		<input type="checkbox"/>

\_\_\_\_\_ ☐ Add  
 \_\_\_\_\_ ☐ Remove

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

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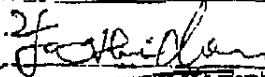
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E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated July 15, 2014

x



Signature of a member or authorized representative of a member

Yong Hui Chen

Typed or printed name of signer

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Filing Fee: \$25.00

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