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(Add	dress)	·
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(City	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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(Do	cument Number)	
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COVER LETTER

TO:

Registration Section
Division of Corporations

SUBJECT:

TIEN TRADING 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:

PAI TIEN CHIN

Name of Person

TIEN TRADING LLC

Firm/Company

16360 SW 114CT

Address

MIAMI FL 33157

City/State and Zip Code

MEGAJLC@YAHOO.COM.HK

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

For further information concerning this matter, please call:

PAI TIEN CHIN

, 786 **, 307-272**1

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

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

TIEN TRADING LLC			
(Name of the Limite	d Liability Company as it now app A Florida Limited Liability Compan	pears on our records.)	<u></u>
,	A 1 totida Emitted Elabitity Compan	,	
The Articles of Organization for this Limited I	Liability Company were filed on Y	JULY 5 2013	and assigned
Florida document number L13000095872	PAI		The state of the
	· · · · · · · · · · · · · · · · · · ·		The second secon
This amendment is submitted to amend the fol	lavina		
This amendment is submitted to amend the joi	iowing:		
A. If amending name, enter the new name	of the limited liability company	<u>here</u> :	77
The new name must be distinguishable and end w "L.L.C."	ith the words "Limited Liability Cor	npany," the designation "L	LC" or the abbreviation
Enter new principal offices address, if appli	cable:		
(Principal office address MUST BE A STRE	ET ADDRESS)		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE	(BOX)		
B. If amending the registered agent and registered agent and/or the new registered of		n our records, <u>enter t</u>	he name of the nev
Togestored agent andror the new registered	Ante address bere.		
Name of New Registered Agent:	PAI TIEN CHIN		
New Registered Office Address:	16360 SW 114CT		
		Enter Florida street add	ress
	MIAMI	, Florida <u>3</u> 3	157
	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, <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
MGR	PAI TIEN CHIN	16360 SW 114CT	Add
		MIAMI FL 33157	Remove
			_
			
			Remove
			Remove
			9 5
		77 s.	Add
			Remove
			-
			Remove
			- _
			
			Remove

AMENDING MGR NAME FROM JOHN T	CHIN TO PAI TIEN CHIN
JULY 16 2013	
Parte (Q. <u>.</u>
Signature of a member or authorized re	representative of a member
Typed or printed name	e of signee
Page 3 of 3	3
Filing Fee: \$2	25.00 <u> </u>
	year