

LB000112367

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

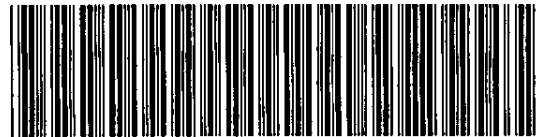
(Business Entity Name)

(Document Number)

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16 NOV 10 PM 3:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. SCOTT

NOV 10 2016

November 2, 2016

Dionne M Scott
Regulatory Specialist
FLORIDA DEPARTMENT OF STATE
Division of Corporations
P.O. BOX 6327
Tallahassee, Florida 32314

RECEIVED
2016 NOV 10 PM 2:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SUBJECT: UNILUMIN LED TECHNOLOGY FL LLC
Letter Number: 716A00022877
Ref. Number: L 13000112367

In Response to your letter (Letter Number: 716A00022877) dated October 25, 2016, we have corrected our document for UNILUMIN LED TECHNOLOGY FL LLC.

We have filed the factious names for the company referred above in separate transactions online.

Please find the enclosed document for amendment of and file accordingly.

If you have any questions concerning the filing of our documents, please call our advisor David Tang, CPA at (734) 239-5643.

XUE DOU

XUE(SHERRY)DOU, Director/Manager
8350 PARKLINE BLVD STE 15
ORLANDO, FL 32809

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TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: UNILUMIN LED TECHNOLOGY FL 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:

XUE (SHERRY) DOU

Name of Person

UNILUMIN LED TECHNOLOGY FL LLC

Firm/Company

8350 PARKLINE BLVD STE 15

Address

ORLANDO, FLORIDA, 32809

City/State and Zip Code

leddisplay-sherry@unilumin.com

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

DAVID TANG, CPA

734

2395643

at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|--|--|---|
| <input type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input checked="" type="checkbox"/> \$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**

UNILUMIN LED TECHNOLOGY FL 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 AUGUST 8, 2013 and assigned
Florida document number L13000112367.

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 contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

N/A - no change

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

N/A - no change

(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:

XUE (SHERRY) DOU

New Registered Office Address:

8350 PARKLINE BLVD STE 15

Enter Florida street address

ORLANDO

City

Florida

32809

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.

XUE DOU

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>	<u>Address</u>	<u>Type of Action</u>
Director	Ms. Xue (Sherry) Dou,	8350 PARKLINE BLVD STE 15,	<input checked="" type="checkbox"/> Add
		ORLANDO, FL, 32809	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
Director	Ms. Yan Hu	8350 PARKLINE BLVD STE 15	<input checked="" type="checkbox"/> Add
		ORLANDO, FL, 32809	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
Director	Ms. Manman Fang,	8350 PARKLINE BLVD STE 15	<input checked="" type="checkbox"/> Add
		ORLANDO, FL, 32809	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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TALLAHASSEE, FLORIDA

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[illegible]

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:
(b) The 90th day after the record is filed.

Dated Nov. 8th, 2016

XUE DON

Signature of a member or authorized representative of a member

MS. XUE (SHERRY) DOU, MANAGING DIRECTOR

Typed or printed name of signee

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

16 MAY 10 PM 3-02

(S) (b)
will not be listed as the
the earlier of: