## 113000123485

(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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JUN 2 8 2017 Y SULKER



June 5, 2017

XIAO YAN SUN 12419 ASTER AVE BRADENTON, FL 34212

SUBJECT: SUNDO TOURISM CONSULTATION AND MANAGEMENT, LLC.

Ref. Number: L13000123485

We have received your document for SUNDO TOURISM CONSULTATION AND MANAGEMENT, LLC. and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Letter Number: 117A00011231

Yasemin Y Sulker Regulatory Specialist II

www.sunbiz.org

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Sundo Tourism Consultation And (Name of the Lim		ny as it now appears on our records.)	
(	(A Florida Limited L	ny as it now appears on our records.) iability Company)	
The Articles of Organization for this Limited I Florida document number L13000123485	Liability Company	were filed on	and assigned
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name	of the limited liabi	lity company here:	
Sundo Tourism Planning & Design LLC			
The new name must be distinguishable and contain the	words "Limited Liabili	ity Company," the designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:		8609 Forest Run	Lane W
(Principal office address MUST BE A STREET ADDRESS)		Orlando, FL 328	336
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)		8609 Forest Rui Orlando, FL 32	
B. If amending the registered agent and registered agent and/or the new registered of	office address here		r the name of the new
Name of New Registered Agent:	Wei Xue		E
New Registered Office Address:	14475 Universit	·	July 100
	Tampa	Enter Florida street address , Florida 3	3613C A
New Registered Agent's Signature, if changing	Registered Agent:	Cip	6.7 180
I hereby accept the appointment as register	ed agent and agre	ee to act in this capacity. I further a	# - <del></del>

If Changing Registered Agent, Signature of New Registered Agent

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.

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 = M $AMBR = A$	lanager uthorized Member V/A		
<u>Title</u>	Name	Address	Type of Action
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an effectiv ote: If t	ive date is listed, the the date inserted	than the date of the date must be specified in this block does on the Department	ic and cannot be prior not meet the applic	able statutory f	or more than 90 day	(optional) s after filing.) ts, this date w	Pursuant to	605,020 listed a
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Page 3 of 3

Filing Fee: \$25.00