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## **COVER LETTER**

TO:

Registration Section
Division of Corporations

	VILLE MASSAGE LLC		
SUBJECT:	Name of Lim	nited Liability Company	<del></del>
The enclosed Articles	of Amendment and fee(s) are sub	omitted for filing.	
Please return all corres	spondence concerning this matter	to the following:	
	Bin Liu		
	<del> </del>	Name of Person	
	GAINESVILLE MASSAC	GE LLC	
Name of Person  GAINESVILLE MASSAGE LLC  Firm/Company  3008 NW 13TH ST STE A  Address  GAINESVILLE, FL 32609  City/State and Zip Code  crystalriverasian@gmail.com  E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:  Bin Liu  352 375-0903  Area Code  Daytime Telephone Number  Enclosed is a check for the following amount:  Enclosed is a check for the following amount:  Certificate of Status  Certified Copy (additional copy is enclosed)  Certificate of			
	3008 NW 13TH ST STE A	<b>\</b>	
		Address	
	GAINESVILLE, FL 3260	9	
	<del></del>	City/State and Zip Code	
	E-mail address: (	to be used for future annual report noti	fication)
For further information	n concerning this matter, please c	all:	
Bin Liu			
Nam	e of Person	Area Code Daytim	e Telephone Number
Enclosed is a check for	r the following amount:		
■ \$25.00 Filing Fee	•	Certified Copy	□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Registration of	n Section Corporations	Registration Se Division of Con	rporations

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

GAINESVILLE MASSAGE LLC		
(Name of the Limited Liability Com (A Florida Limite	pany as it now appears on our red Liability Company)	ecords.)
The Articles of Organization for this Limited Liability Compare Florida document number L14000046051	ny were filed on 03/20/2014	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	ability company here:	
The new name must be distinguishable and contain the words "Limited Lia	ability Company," the designation	"LLC" or the abbreviation "L.L.C."
-		
Enter new principal offices address, if applicable:		501
(Principal office address MUST BE A STREET ADDRESS)	<u> </u>	
		1389 <b>3</b> 1
		288
Enter new mailing address, if applicable:		<b>100</b>
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered offic	e address on our records, <u>e</u>	nter the name of the new registere
agent and/or the new registered office address here:		
Name of New Registered Agent:		
New Designand Office Address		
New Registered Office Address:	Enter Florida street a	uddress
		F1 4 -
	City	_, Florida Zip Code
New Registered Agent's Signature, if changing Registered Ager	r it:	·
	-	rea
I hereby accept the appointment as registered agent and approvisions of all statutes relative to the proper and comple		
accept the obligations of my position as registered agent a		
heing filed to merely reflect a change in the registered offi		

If Changing Registered Agent, Signature of New Registered Agent

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 = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	ZHENMEI DU	3008 NW 13TH ST STE A	□Add
		GAINESVILLE, FL 32609	■ Remove
			□Change
			□Add
			□Remove
		<del> </del>	☐Change
		□ Add	
	<u></u>	Remove	
			☐ Change
		□Add	
			□ Remove
			Change
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			□Change
			□Add
			□ Remove
			Change

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004!	date, if other than the date of filing:(optional)
an effec	ve 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 605.020
	the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed at self-ective date on the Department of State's records.
<i>Rumer</i>	as effective date of the Department of State 3 records.
rocord	pecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
is file	·
ated	$0 \le 10 \ge 10 \ge 0$
	2
	Signature of a member or authorized representative of a member
	Signature of a member or authorized representative of a member

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