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## **COVER LETTER**

TO: Registration Sec Division of Corp		
Dialectic Flo	ow Technologies, LLC	
SUBJECT.	Name of Limited Liability Company	
•		
The enclosed Articles of A	Amendment and fee(s) are submitted for filing.	
Please return all correspon	ndence concerning this matter to the following:	
	Gecheng Zha	
	Name of Person	
	Dialectic Flow Technologies, LLC	
	Firm/Company	
	22231 SW 92nd PL	
	Address	
•	Cutler Bay, FL 33190	
	City/State and Zip Code	
	gecheng@yahoo.com  E-mail address: (to be used for future annual report notification)	
For further information co	oncerning this matter, please call:	
Gecheng Zha	305 2843328 at (	
Name of		
Enclosed is a check for the	e following amount:	
\$25.00 Filing Fee	□ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certificate of Status  Certified Copy (additional copy is enclosed)  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

Dialectic Flow Technologies, LLC	•	
( <u>Name of the Limited Liabil</u> (A Florid	ity Company as it now appears on our records.) a Limited Liability Company)	
The Articles of Organization for this Limited Liability ( Florida document number L14000083807	Company were filed on May 23, 2014	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	nited liability company here:	
The new name must be distinguishable and contain the words "Lin	nited Liability Company," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADD)	•	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)	,	
B. If amending the registered agent and/or registered agent and/or the new registered office add  Name of New Registered Agent:	stered office address on our records, <u>e</u> l <u>ress here</u> :	nter the name of the new
New Registered Office Address:		
New Registered Office Address.	Enter Florida street address	<del></del>
	Florid	la.
<del></del>	City , F10F10	Zip Code
New Registered Agent's Signature, if changing Registere	d Agent:	
I hereby accept the appointment as registered agent provisions of all statutes relative to the proper and caccept the obligations of my position as registered a being filed to merely reflect a change in the registere company has been notified in writing of this change.	complete performance of my duties, and I gent as provided for in Chapter 605, F.S ed office address, I hereby confirm that the	am familiar with and Or, if this document is the limited liability
	If Changing Registered Agent, Signature of No	Wedarier Walt

Page 1 of 3

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>	Name	Address	Type of Action
MBR	Yi Dai	630 Loveland Ave, Mukilteo, WA	
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Filing Fee: \$25.00