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COVER LETTER

Division of Corp	porations					
SUBJECT:	Beijing Take	10 LLC ited Liability Company				
	Amendment and fee(s) are sub-	_				
Please return all correspon	ndence concerning this matter	to the following:				
		Tong Lin				
		Beijing Takyo LLC	<u>.</u>			
	3809 Bens	on Park Blvd Address				
	Orla	ndo, FL 32829 City/State and Zip Code tox 1 @ gmail. com to be used for fujure annual report notific			201	
		City/State and Zip Code				ri≠
	eastred 5 mail address (tox 1@ gmail. com	ation)	:	295 TAY 25	ويعر ويعر
For further information co	n-mail address: (i	•	ation)		ن ا	- ∰ - ∰ - ₩ - →
Tong	Lin	at (407) 808 - 50 Area Code Daytime 7	56		े हिंद अक्ष	
Dame o	rerson	Area Cpue Daytime	elephone Number			
Enclosed is a check for the	ne following amount:					
\$25.00 Filing Fee	□ \$30.00 Filing Fec & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Certificate of Certified Co (additional cop	of Statu opy		

MAILING ADDRESS:

Registration Section

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

Bei Jing Tok (Name of the Limited Liability Compar (A Florida Limited L	w as it now appears on our records.)	
The Articles of Organization for this Limited Liability Company Florida document number	were filed on <u>09/25/2014</u>	and assigned
A. If amending name, enter the new name of the limited liabi	lity company here:	
The new name must be distinguishable and contain the words "Limited Liabili		
Enter new principal offices address, if applicable:	16112 Marsh Rd #4	-13
(Principal office address MUST BE A STREET ADDRESS)	16112 Marsh Rd #4 Winter Garden, F	上3478至
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	16112 Marsh Rd Winter Garden	#413 , FL 34787
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here	fice address on our records, ento	er the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Florida	
	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 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 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:

anager uthorized Member		
<u>Name</u>	Address	Type of Action
		Remove
		Change
		Add
		□ Remove
		Change
		Add
		□ Remove
		Change
		□ Change □ Add
		□ Add □ Add □ Remove □
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	uthorized Member	Name Address

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Filing Fee: \$25.00