L14000/50476

(Re	questor's Name)	
DA)	dress)	
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(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Business Entity Name)		
(Do	cument Number)
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	
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FILED

16 MAY 12 MI 9: 26
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COVER LETTER

TO: Registration Se Division of Co				
SUBJECT:	Beijing Toke	10 LLC. ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
		Name of Person Beijing Takyo Firm/Company	LLC.	16 S501
	16112 W	larsh Rd #413 Address	· ,	FILE INV 12
	Winter Eastred	Beijing Tokyo Firm/Company Larsh Rd #413 Address - Garden - FL 34 City/State and Zip Code Lax 1@ gmail. con to be used for futtyle annual report notifi	78 7	MAY 12 M 9 26 MAY 12 M 9 26 MAY 12 M 9 26 MAY 12 M 9 26
	oncerning this matter, please co		(Cation)	
Lin,	Tong f Person	at (917) 214-To	Telephone Number	
Enclosed is a check for t	he following amount:			
\$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing Certificate of Certified Co (additional cop	of Status &
MAIL Registi Divisio P.O. B	ING ADDRESS: ation Section on of Corporations ox 6327 assee, FL 32314	STREET/COURING Registration Section Division of Corpora Clifton Building 2661 Executive Cer Tallahassee, FL 323	n utions nter Circle	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Whited Liability Companied Limited Limite	YO LLC ny as it now appears on ou	r records.
The Articles of Organization for this Limited Liability Company vi Florida document number <u>L14000150476</u> .		
This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liabil	lity company here:	
NA		
The new name must be distinguishable and contain the words "Limited Liabili	ity Company," the designati	
Enter new principal offices address, if applicable:		28 5
(Principal office address MUST BE A STREET ADDRESS)	NA	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NA	12 13 9 26 SEEL FLORING
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, enter the name of the new
Name of New Registered Agent:	1	
New Registered Office Address:	Enter Florida stree	et address
		Thereta.
	City	, Florida 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:

MGR = Manager

$AMBR = \lambda$	Authorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Gui Feng Lin	10845 Arbor view Blud Orlando, FL 32825	Add
		Orlando, FL 32825	Remove
	·		Change
			
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Effective date, if other than the date of filing:	——————————————————————————————————————	
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e record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the ear The 90th day after the record is filed.	ecord specifies a delayed effective date, but not an effective date date, but not an effective date date, but not an effective date date date date date date date dat	fective time, at 12:01 a.m. on the earlier of
ared May 9th 2016.	,	
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Filing Fee: \$25.00