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COVER LETTER

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TO: Registration Section Division of Corporations

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KUNG FU-SION LLC

SUBJECT:

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

POON, NORMAN

Name of Person

FirmeCompany

1926 COMMON WAY ROAD

Address

ORLANDO, FL 32814

City/State and Zip Code ROBERTSHO1021@HOTMAIL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call;

Enclosed is a check for the following amount:

□ \$25.00 Filing Fee

S30.00 Filing Fee & Certificate of Status

\$55.00 Filing Fee & Certified Copy (additional copy is enclosed) \$60.00 Filing Fee, Certificate of Status & 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

KUNG FU-SION LLC

(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 10/1/2014	and assigned
Florida document number L14000153580	

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC"	
Enter new principal offices address, if applicable:	18 Sec
(Principal office address MUST BE A STREET ADDRESS)	
Fatar ann an llian addreas (f. 1911).	AM Sec
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	

B. If amending the registered agent and/or registered office address on our records, <u>enter the name of the new</u> registered agent and/or the new registered office address here:

Name of New Registered Agent:		_
New Registered Office Address:		
	Enter Florida street ada	bress
		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, <u>enter the title, name, and address of each person</u> being added or removed from our records:

MGR = Manager

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AMBR = Authorized Member

<u>Title</u>	Name	<u>Address</u>	Type of Action
MGR	PUN, KWAI K.	1926 COMMON WAY RD. ORLANDO, FL 32814	🖬 Add
		·	
			Remove
			🗆 Change
·			🗆 Add
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			🗆 Add
			Remove
			Change
		<u> </u>	🛛 Add
			Remove
			Change

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AH 11: 50
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

9/12 Dated	2018
	(Dri
	Signature of a member of authorized representative of a member
	N
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00