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## **COVER LETTER**

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	egistration Sec ivision of Corp				
CUD IECT	Dynamic Pr	ogressive LLC			
Name of Limited Liability Company					
The enclos	sed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please retu	irn all correspo	ndence concerning this matter	to the following:		
		Wade Yang			
			Name of Person		
			Firm/Company		
		8134 NW 51st Drive			
			Address		
		Gainesville, FL 32653			
			City/State and Zip Code		
		wdyang48@gmail.com  E-mail address: (1	to be used for future annual report notif	ication)	
For furthe	r information co	oncerning this matter, please ca			
Wade Yar	ng		407 5757825 at ( )		
	Name of	f Person	Area Code Daytime	Telephone Number	
Enclosed	is a check for th	ne following amount:			
\$25.00	0 Filing Fee	■ \$30.00 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**

appears ол our records.) npany)
on February 15, 2013 Q4\5 and assigned
any here:
y," the designation "LLC" or the abbreviation "L.L.C."
31. <u>22</u>
THE STATE OF THE S
ess on our records, enter the name of the ne
nter Florida street address
, Florida
Zip Code

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</u>, <u>name</u>, <u>and address of each person being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	Weihua Wade Yang	8134 NW 51st Drive, Gainesville, I	Add
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<b>Tective date, if other than</b> an effective date is listed, the date	the date of filing:  e must be specific and cannot be prior to date of filing	optional) ng or more than 90 days after filing.) Pursuant to 605.02
ote: If the date inserted in th		ry filing requirements, this date will not be listed
soument's effective date on the	ne Department of State 3 records.	
e record specifies a dela The 90th day after the		tive time, at 12:01 a.m. on the earlier
May 1	2015	
nted May I	, 2015	_
		15
	1-VW	entative of a member

Page 3 of 3

Filing Fee: \$25.00

Typed or printed name of signee