L15000//357.7

(Red	questór's Name)	<u> </u>
	Sample Rd. Ste. 10 ngs, FL 33065	01
(City	//State/Zip/Phone #	#)
PICK-UP	WAIT	MAIL
(Bus	siness Entity Name)
	· •	
(Doc	cument Number)	
Certified Copies	Certificates of	of Status
Special Instructions to F	Filing Officer:	

Office Use Only



400277029074 L15-113577

Amend



OCT 20 2015 N. CAUSSEAUX

COVER LETTER

SU	BJECT:	WINNIN	IG GROUP, LLC	
		Name of Limi	ted Liability Company	
Th	e enclosed Articles of A	mendment and fee(s) are sub-	nitted for filing.	
Ple	ase return all correspond	dence concerning this matter	to the following:	
			KENNETH YEUNG	
			Name of Person	
			WINNING GROUP, LLC	
			Firm/Company	
		117	64 W. SAMPLE RD.S TE. 1	01
			Address	
		C	CORAL SPRINGS, FL 33065	
			City/State and Zip Code	
			BYMCPA@MYACC.NET	
			o be used for future annual repo	rt notification)
Fo	r further information cor	cerning this matter, please ca	ill:	
	SHIRLEY CHANG		954 575-25 at ()	544
	Name of I	erson		Paytime Telephone Number
En	closed is a check for the	following amount:		
	\$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed	Section 1 \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

TO:

Registration Section
Division of Corporations

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



FLORIDA DEPARTMENT OF STATE Division of Corporations

October 7, 2015

KENNETH YEUNG C/O WINNING GROUP LLC 11764 W SAMPLE ROAD, SUITE 101 CORAL SPRINGS, FL 33065

SUBJECT: WINNING GROUP, LLC

Ref. Number: L15000113577

We have received your document for WINNING GROUP, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Letter Number: 415A00021226

Nanette Causseaux Regulatory Specialist II Supervisor

www.sunbiz.org

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

\mathbf{W}_{i}	INNING GROUP, LLC	
(<u>Name of the Limited Li</u> (A Fl	ability Company as it now appears on our records.) orida Limited Liability Company)	
The Articles of Organization for this Limited Liability Florida document numberL15000113577		and assigned
This amendment is submitted to amend the following	g:	
A. If amending name, enter the new name of the	limited liability company here:	
		A S
The new name must be distinguishable and contain the words	'Limited Liability Company," the designation "LLC" or	the abbreviation BL.C."
Enter new principal offices address, if applicable	<u></u>	20 5
(Principal office address MUST BE A STREET AL	DDRESS)	ST TI
	<u> </u>	
Enter new mailing address, if applicable:		12 ATE DRIDA
(Mailing address MAY BE A POST OFFICE BOX	2	
B. If amending the registered agent and/or registered agent and/or the new registered office a		enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	Ela-2.	J.
_	, Florie	Qa

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_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	XUE DI ZHENG	11764 W SAMPLE RD STE 101	
		CORAL SPRINGS, FL 33065	Remove
			Change
		 	☐ Add
			□ Remove
			Change
			DAdd DAdd
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ective date, if other than the ceffective date is listed, the date must e: If the date inserted in this bloument's effective date on the Department.	ate of filing: Despecific and cannot be prior to date of filing or more the does not meet the applicable statutory filing repartment of State's records.	(optional) e than 90 days after filing.) Pursuant to 605.0207 (3)(b requirements, this date will not be listed as the
record specifies a delayed he 90th day after the reco	effective date, but not an effective timed is filed.	ne, at 12:01 a.m. on the earlier of:
edAUGUST 27,	2015	
	Han	
	ignature of a member or authorized representative of	a member
•	C C	

Page 3 of 3

Filing Fee: \$25.00