L15000148961

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C. BRUMBLEY
JAN - 3 2022

. COVER LETTER

TO: Registration Sec Division of Corp		
Y&N BUID SUBJECT:	ING SUPPLY US LLC	
	Name of Limited	d Liability Company
The enclosed Articles of	Amendment and fee(s) are submitt	
Please return all correspon	ndence concerning this matter to the	the billowing:
	HUNG YAU	
		Name of Person
	2520 W. 78 ST # 2520-5	Firm/Company
	HIALEAD FL 33016	Address
		City State and Zip Code
	YS888@VIP.163.COM E-mail address: (to be	cell be used for future annual report notification)
For further information co	oncerning this matter, please call:	1
HUNG YAU		929 2786618 at ()
Name of		Area Code Daytime Telephone Number
Enclosed is a check for th	e following amount:	
□ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & S60.00 Filing Fee, Certified Copy additional copy is enclosed) Certified Copy (certified Copy) (dditional copy is enclosed)
Malling Address Registration S Division of Co P.O. Box 632' Tallahassee, F	ection orporations 7	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Y&N BUIDING SUPPLY US LLC

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(Name of the Limited Liability (A Florida	Company as it now appears on our records.) imited Liability Company)
The Articles of Organization for this Limited Liability Co	mpany were filed on 8/31/205 and assigned
Florida document number L15000148961	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limit	ad liability company here:
	LE STATE
The new name must be distinguishable and contain the words "Limit	d Liability Company," the designation "LLC" or the abbreviation: L.L.C."
Enter new principal offices address, if applicable:	- Δ. Δ.
(Principal office address MUST BE A STREET ADDRE	35) A
	77. 89
	JE 3
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
	office address on our records, enter the name of the new registered
agent and/or the new registered office address here:	
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	
provisions of all statutes relative to the proper and con	ml agree to act in this capacity. I further agree to comply with the mplete performance of my duties, and I am familiar with and the series of
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
	The state of the s
i	

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 = Authorized Member Type of Action <u>Title</u> <u>Name</u> <u>Address</u> MGR NIU LIYUN 2520 WEST 78TH ST # 2520-5 □Add HIALEAH FL 33016 **≅**R¢move □Add $\square Remove$ □ Change \square Add □Remove \square Change □Add __ □Remove _ Change □Add □Remove Change \Box Add □Remove ☐ Change

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the date inserted in th	is block does not	meet the app	blicable statutory filing requirements, this date will not be listed as the
's effective date on t	he Department of	State's recor	rds.
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		2021	
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	Signature of	a member or bu	uthorized representative of a member
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