45000175076

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M. MILLIGAN OCT 1 2 2017

COVER LETTER

INHS18 (2/14)

TO:	Registration Section Division of Corporations	
	121VIBION OF CONFAMENTAL	
SUBJE	CCT: SUNFLOWER GARDEN S	SPA LLC
	Name o	of Limited Liability Company
Dear Si	ir or Madam:	
The end	closed Registered Agent/Registered Office	Change and fee(s) are submitted for filing.
Please i	return all correspondence concerning this i	matter to the following:
Y	AN QIN	
	Name of Person	
SUNF	LOWER GARDEN SPA LLC	
	Firm/Company	
407	S. Federal Highway, Suite	N
	Address	
Boyn	ton Beach FL 33435	
	City/State and Zip Code	
CON	NIEVIP0424@gmail.com	
E-	-mail address: (to be used for future annua	l report notification)
For furt	ther information concerning this matter, pl	case call:
?	YAN QIN	at (347) 335-3922
	Name of Person	Area Code & Daytime Telephone Number
	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
	Enclosed is a check for the following ar	nount:
	\$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

20ML FOM	ER GARDEN SPA LLC	2 "1
(Name of the Limit	ed Liability Company as it now appears on (A Florida Limited Liability Company)	our records.)
The Assistance CO of Constant Constant Constant	10. The Comment of the 10.	14-2015 and assigned
The Articles of Organization for this Limited L	iability Company were filed on	14-2015 and assigned.
Florida document number <u>L15000175076</u>	<u>. </u>	
This amendment is submitted to amend the foll-	owing:	O HILLS
A. If amending name, enter the new name o	f the limited liability company here:	£ "
The new name must be distinguishable and contain the v	ords "Limited Liability Company," the design	ation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applic	able:	
(Principal office address MUST BE A STREE	T ADDRESS)	
Enter new mailing address, if applicable:		
•		
Mailing address MAY BE A POST OFFICE	<u></u>	
	<u> </u>	
B. If amending the registered agent and		r records, enter the name of the new
registered agent and/or the new registered of	fice address here:	
Name of New Registered Agent:	YAN QIN	
	407 S. Federal Highwa	v Ste N
New Registered Office Address:		
	Enter Florida s	reet address
	BOYNTON BEACH	Florida = 33435
	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 Stanature of New Registered Agent

YAN QIN

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

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	YAN QIN	407 S. Federal Highway, Ste N Boynton Beach FL 33435	Ù Add
REGISTERED	AGENT -Yan Qin		☐ Remove
			d Remove
			Change
			Add
REGISTERED	AGENT _Eric Alan Lane	ERIC ALAN LANE	Remove
			Change
			O Add
			Remove
			Change
			_D Add
			Remove
			Change
			_□ Add
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			_□ Change
			_□ Add
			_□ Remove
			☐ Change

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ADD	YAN Q	IN AS	REGISTER	RED AGENT	r AND	MANAGER			
									
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	date if	other the	an the date of	f filing:	10-	-4-2017	/or	otional)	
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Filing Fee: \$25.00