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COVER LETTER .

TO: Registration Secti Division of Corpo	on rations		•
SUBJECT: TE	Ri YAKi 1 HA	HA LLC	
	Name of Lim	ited Liability Company	
	nendment and fee(s) are sub	_	
Please return all correspond	ence concerning this matter	to the following:	
	Xi ANG M.	Name of Person	
·			
	TER'YA	K. 1 HA HA LLC	
		Firm/Company	
	4/04 NA	KEMA Drive South	TX
		Address	
	JACK SUNVI	lle FL 32257	
	Chmin 88	He FL 32257 City/State and Zip Code 8 a hotmail. Com to be used for future annual report no	
		•	tification)
For further information cond	cerning this matter, please ca	all:	A
Name of Pe	erson	at (904) 823 Area Code Daytis	- 9933 me Telephone Number
Enclosed 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)	□ \$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**

TERIYAK: 1	HA HA LLO			
(Name of the Limited Liability Co (A Florida Lim	ompany as it now appears or nited Liability Company)	n our records.)		
The Articles of Organization for this Limited Liability Comp Florida document number <u>L/500018 70 8/</u> .	pany were filed on02	2/21/2017	and ass	signed
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 desig	nation "LLC" or the abbre	eviation "L	.L.C."
Enter new principal offices address, if applicable:				-
(Principal office address MUST BE A STREET ADDRES.	<u>s)</u>		=	
			FEB	<u> </u>
			27	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		·	3	500 500 500 500 500 500 500 500 500 500
			- 12	AA
B. If amending the registered agent and/or registere registered agent and/or the new registered office address		ur records, <u>enter th</u>	<u>ie name</u>	of the nev
Name of New Registered Agent:				
New Registered Office Address:	97.11			
	Enter Florida			
 	City	, Florida	Zip Code	
New Registered Agent's Signature, if changing Registered Ag	zent:			

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, 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	CHUN Rong Lin	4104 NAKEMA DRIVE South	D Add
			Remove
		Jacksonville FLorida 32259	7 □ Change
 			Add
			Remove
			Change
			Add
	•		Remove
			Change
			□ Add
			□ Remove
			Change
			FE 27
			Sivie De hanger
			□ Add
			Remove
			☐ Change

D. If an	nending any other information, enter change(s) here: (Attach additional sheets, if necessary.)		
			
		<u>,</u>	
			
		·	
			
			
(If an e Note	tive date, if other than the date of filing: Description of the date of filing: Optional (optional) ffective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursual Interest of the date inserted in this block does not meet the applicable statutory filing requirements, this date will nument's effective date on the Department of State's records.		
	ecord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the e 90th day after the record is filed.	e earlier	of:
Dated	, 02 /21 , 02017	17 FEB 27	STOPE I
	Signature of a member or authorized representative of a member		100 J.
	Xi ANG MiN Che N Typed or printed name of signee	PM 12: 3	구 왕 왕 8 8

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Filing Fee: \$25.00