LI5000212.351

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COVER LETTER

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TO: **Registration Section**

Division of Corporations

YMTH HOLDINGS LLC

SUBJECT:

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

WILLIAM HSU WU

Name of Person

YMTH HOLDINGS LLC

hrm/Company

9438 BRISTIOL RIDGE CT

Address

WEST PALM BEACH, FL 33411

City/State and Zip Code

YMTHLLC@GMAIL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

WILLIAM HSU WU

305 6065855 at (_ Daytime Telephone Number Name of Person Area Code

Enclosed is a check for the following amount:

\$25.00 Filing Fee

S30.00 Filling Fee & Certificate of Status □ \$55,00 Filing Fee & Certified Copy (additional copy is enclosed) Ü \$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 Address; **Registration Section** Division of Corporations The Centre of Tailahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

	OF ANIZATION OF ANIZATION
FOLKESTONE HOLDINGS LLC	
(<u>Name of the Limited Liability Con</u> (A Florida Limit	npany as it now appears on our records.) ed Liability (Company)
he Articles of Organization for this Limited Liability Compa lorida document number <u>L15000212351</u> .	any were filed on <u>12/23/2015</u> and assigned
his amendment is submitted to amend the following:	
A. If amending name, <u>enter the new name of the limited l</u>	iability company here:
he new name must be distinguishable and contain the words "Limited 1.	iability Company," the designation "LLC" or the abbreviation "LL.C."
inter new principal offices address, if applicable:	9438 BRISTOL RIDGE CT
• •	WITCH DATA DUACHT 12 - 22411
•••	WITCH DATA DUACHT 12 - 22411
Principal office address MUST BE A STREET ADDRESS	WHET DATA DEACHT DE 224(1
Enter new principal offices address, if applicable: <u>Principal office address MUST BE A STREET ADDRESS</u> Enter new mailing address, if applicable: <u>Mailing address MAY BE A POST OFFICE BOX</u>)	WEST PALM BEACH, FL 33411
Principal office address MUST BE A STREET ADDRESS	WEST PALM BEACH, FL 33441 9438 BRISTOL RIDGE CT
<u>Principal office address MUST BE A STREET ADDRESS</u> Enter new mailing address, if applicable: <u>Mailing address MAY BE A POST OFFICE BOX</u>	2 WEST PALM BEACH, FL 33411 9438 BRISTOL RHOGE CT WEST PALM BEACH, FL 33411
<u>Principal office address MUST BE A STREET ADDRESS</u> Enter new mailing address, if applicable: <u>Mailing address MAY BE A POST OFFICE BOX</u>	WEST PALM BEACH, FL 33441 9438 BRISTOL RIDGE CT
Principal office address MUST BE A STREET ADDRESS Inter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BON 3. If amending the registered agent and/or registered offi	2 WEST PALM BEACH, FL 33411 9438 BRISTOL RHOGE CT WEST PALM BEACH, FL 33411
Principal office address MUST BE A STREET ADDRESS Inter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BON 3. If amending the registered agent and/or registered offi	2 WEST PALM BEACH, FL 33411 9438 BRISTOL RHOGE CT WEST PALM BEACH, FL 33411

New Registered Agent's Signature, if changing Registered Agent:

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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. Thereby 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</u> being added or removed from our records:

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MGR = Manager AMBR = Authorized Member

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<u>Title</u>	Name	Address Mar 821 82 AN 7: 32	Type of Action
MGR	MAX CHIANG	· · · · · · · · · · · · · · · · · · ·	_ 🗆 Add
		4425 SW 88 AVE, MIAMI FL 33165	_
			_ 🗆 Change
MGR	YEN YI SU	9438 BRISTOL RIDGE CT. WEST PALM BEACH	_ ≣ Add
		FL 33411	_ 🗌 Remove
			_ 🗆 Change
			_ 🗆 Add
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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__ (optional)

E. Effective date, if other than the date of filing: ________________(optional) (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

SEPTEMBER 14TH	2021	
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•····	Signature of a member or authorized representative of a member	
	William Hs. W.	
	Typed or printed name of signce	