L16000046105

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	> #)
PICK-UP	☐ WAIT	MAIL
(Bu	ısiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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SECRETARY OF STATE

D. ERUCE

COVER LETTER

Divi	ision of Corp	orations			
SUBJECT:	ASAM PRO	PERTIES LLC			
DODGET.		Name of Limi	ited Liability Company		
The enclosed	Articles of A	mendment and fee(s) are sub-	mitted for filing.		
Please return	all correspon	dence concerning this matter	to the following:		
		YINAN ZHAO			
			Name of Person	<u> </u>	
		ASAM PROPERTIES LLC			
			Firm/Company		
		4830 WEST KENNEDY B	LVD, SUITE 600		
			Address		
		TAMPA, FLORIDA 33609)		
		4	City/State and Zip Code		
		ANGELA@KGGINC.COM	I		
		E-mail address: (t	o be used for future annual report notificatio	<u>n)</u>	
For further in	formation co	ncerning this matter, please ca	11:	SEC MLL.	2016
YINAN ZHA	40		626 320-2065 at ()	AHA:	
	Name of	Person		phone Number	<u>- </u>
				 	<u>س</u> و
Enclosed is a	check for the	following amount:		22.	<u> </u>
□ \$25.00 F	iling Fee	■ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Firing Fee Certificate of Sta Certified Copy (additional copy is en	atus &

MAILING ADDRESS:

TO: • Registration Section

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

ASAM PROPERTIES LLC				
(Name of the Limi	ted Liability Compa (A Florida Limited)	any as it now appears on our records.) Liability Company)		
The Articles of Organization for this Limited L Florida document number L16000046105		•	and assigned	
This amendment is submitted to amend the foll	owing:			
A. If amending name, enter the new name of	of the limited liab	vility company here:		
<u> </u>				
The new name must be distinguishable and contain the	vords "Limited Liabi	lity Company," the designation "LLC" or the	e abbreviation "L.L.C."	
Enter new principal offices address, if applicable:		4830 WEST KENNEDY BLVD		
(Principal office address MUST BE A STREE	ET ADDRESS)	SUITE 600		
		TAMPA, FLORIDA 33609		
Enter new mailing address, if applicable:		4830 WEST KENNEDY BLVD		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	BOX)	SUITE 600		
		TAMPA, FLORIDA 33609		
B. If amending the registered agent and registered agent and/or the new registered of Name of New Registered Agent: New Registered Office Address:	YINAN ZHAO	e: ENNEDY BLVD SUITE 600	FILE BECRETARY OF LLAHASSEE, F	
	TAMBA	Enter Florida street address	1883 W	
	TAMPA	, Florida	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, 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	YAN CHEN	4830 W. KENNEDY BLVD	_⊟ Add
		SUITE 600	☐ Remove
		TAMPA, FLORIDA 33609	Change
			Add
			☐ Remove
			☐ Change
			Add
			Remove
			☐ Change
			2016 Remove Change
			OF STANDARD
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	10/21/	2016		F. 5	Ų	C
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ote: If the date inserted in this block ocument's effective date on the Depar	does not meet the a	pplicable statutory:	or more than 90 days a filing requirements,	this date wi	ursuar∎to 6 Il not be li	605.020 isted a
record specifies a delayed ef The 90th day after the record	fective date, bu is filed.	t not an effectiv	ve time, at 12:0	1 a.m. on	the ear	lier (
OCTOBER 31	2016	·				
.^	1					
	AUT -		ative of a member			

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00