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(Re	questor's Name)	
DA)	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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(Do	cument Number)	
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Amend

MAR 2 3 2020 I ALBRITTON

COVER LETTER

	istration Se ision of Cor					
SUBJECT:		ang Bao LLC				
SOBJECT.		Name of Lim	ited Liability Company			
The enclosed	Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return	all correspo	ndence concerning this matter	to the following:			
		Abraham Nguyen				
			Name of Person			
		Nathan Hoang Bao LLC				
			Firm/Company			
	2020 NE 135th Street #808					
			Address			
		North Miami, FL 33181				
			City/State and Zip Code			
		abekho@yahoo.com				
		E-mail address; (to be used for future annual report notif	fication)		
For further in	iformation c	oncerning this matter, please ca	all:			
Abraham Ng	guyen		863 521-5616 at ()			
	Name o	f Person		e Telephone Number		
Enclosed is a	check for th	ne following amount:				
■ \$25.00 F	iling 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

Nathan Hoang Bao LLC

(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)

The sectioned is The Articles of Organization for this Limited Liability Company were filed on $\frac{02/24/2020}{2}$ Florida document number L16000057604 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: N/A The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) N/A Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Abraham Nguyen Name of New Registered Agent: 2020 NE 135th Street #808 New Registered Office Address:

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.

City

North Miami

If Changing Registered Agent, Signature of New Registered Agent

Enter Florida street address

_. Florida <u>33181</u> Zip Code

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	Abraham Nguyen	2020 NE 135th Street ≠808 North Miami FL 33181	Add
			☐ Remove
			■ Change
AMBR	Hai DO	2020 NE 135th Street #808 North Miami FL 33181	Add
			☐ Remove
			_ ■ Change
			Add
			Remove
			Change
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N/A									
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: If the	date inserted	in this block d	loes not m	eet the app	olicable stat	utory filing	requirement	s, this date w	fill not be listed
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Page 3 of 3

Typed or printed name of signee

Hai Do (MGR)

Filing Fee: \$25.00