P. 001/004

8/31/2016

Division of Corporations

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

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Electronic Filing Menu

Corporate Filing Menu

Help

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PROPERTY

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Zip Code

(A Florida Limited L	ability Company)
The Articles of Organization for this Limited Liability Company value of Company value of the Articles of Organization for this Limited Liability Company value of Company value	overe filed on 08/15/2016 and assigned
A. If amending name, enter the new name of the limited liabil	lity company here:
The new name must be distinguishable and contain the words "Limited Liability	ty Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	19564 SW 42 CT MIRAMAR, FL 33029
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	19564 SW 42CT MIRAMOR, FL 33029
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here	lce address on our records, enter the name of the new
Name of New Registered Agent: CH	EUNG, ALVIN
New Registered Office Address: 195	64 SW 42 CT Enter Florida street address
Mi	RAYAR Florida 33029

Now 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

If Changing Registered Agent, Signature of New Resistered Agent

Page 1 of 3

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

Title	Name	Address	Type of Action
AMBR	CORONEL, MIGUEL	19564 SW 42 CT	[] Add
		MURAMAR, FL 33028	Remove
			D Change
AMBR	CHAN, SHUI HING	19564 SW 42CT	D Add
		MIRAMAR, FL 33028	Remove
	•		Change
AMBR	CHEWIG, ALVIN	19564 S.W. 42 CT	G/Add
		MIRAMOR FL 33029	□ Remove
			🗀 Change
AMBR	CHAN, SHULL HING	19564 S.W. 42 CT	_ M Add
		MIRAMAR, FL 33029	_ Remove
			Change
			_D Add
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		F STATE FLORIDA	_□ Removė
			_□ Change

. If amer	nding any other information, enter change(s) here: (Attach addition	nal sheets, if necessary.)	
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Effective	e date if other than the date of filing: 08/17/20(6	(antional)	
(If an effect Note: If	e date, if other than the date of filing: 08/17/2016 ive date is listed, the date must be specific and cannot be prior to date of filing or morths date inserted in this block does not meet the applicable statutory filing	e than 90 days after filing.) Pursuant to 605	.0207 (3 ed as th
documen	t's effective date on the Department of State's records.		,
he recoi	rd specifies a delayed effective date, but not an effective tir Oth day after the record is filed.	ne, at 12:01 a.m. on the earlie	er of:
Dated	08/17/2016	2116	
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	Signature of a member of authorized representative of	a member	
	aline Cheurs	AS TO	
	Typed or printed name of signee		
	, =	STATE LORIDA	
	Page 3 of 3	₽ '2	

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