

116000 162 424

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

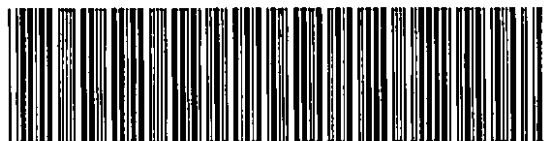
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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DIVISION OF CORPORATIONS

O SIMMONS
JUL 21 2017

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Fei & Woerner CPAs PLLC

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:

Jia Fei

Name of Person

Fei & Woerner CPAs PLLC

Firm/Company

8837 Oak Landings Ct.

Address

Orlando, FL 32836

City/State and Zip Code

fei@fwcpall.com

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

For further information concerning this matter, please call:

Liyuan Woerner

Jia Fei

at (407)

267-3031

408-7517

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

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2017 JUL -5 AM 10:18
TALLAHASSEE, FLORIDA

NO

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Fei & Woerner CPAs PLLC

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

The Articles of Organization for this Limited Liability Company were filed on 9/1/2016 and assigned
Florida document number L16000162424

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Florence Fei CPA & Associates, LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

7208 Sand Lake Rd. Suite 305

(Principal office address MUST BE A STREET ADDRESS)

Orlando, FL 32819

Enter new mailing address, if applicable:

8837 Oak Landings Dr. Ct.

(Mailing address MAY BE A POST OFFICE BOX)

Orlando, FL 32836

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:

Name of New Registered Agent:

Jia Fei

New Registered Office Address:

8837 Oak Landings Dr. Ct.

Enter Florida street address

Orlando

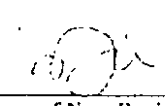
Florida 32836

City

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>	<u>Address</u>	<u>Type of Action</u>
AMBR	Liyuan Woerner	9063 Dancy Tree Ct.	<input type="checkbox"/> Add
		Orlando, FL 32836	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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DIVISION OF CORRECTIONS

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DIVISION OF CORRECTIONS

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.

Dated 07/01/2017

for the

Signature of a member or authorized representative of a member

Tia Fei

Typed or printed name of signee



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 10, 2017

JIA FEI
8837 OAK LANDINGS CT.
ORLANDO, FL 32836

SUBJECT: FEI & WOERNER CPAS PLLC
Ref. Number: L16000162424

We have received your document for FEI & WOERNER CPAS PLLC, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$25.00.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Deborah Bruce
Regulatory Specialist III

Letter Number: 417A00013840