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(Re	equestor's Name)	
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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## **COVER LETTER**

	gistration Section vision of Corporations	
CUD IFOT.	H-W-H-Y COMPANY LLC	
SUBJECT:	Name of Limited Liability Company	
The enclose	d Articles of Amendment and fee(s) are submitted for filing.	
Please return	n all correspondence concerning this matter to the following:	
	JIANG, JIANMIN	
	Name of Person	
	H-W-H-Y COMPANY LLC	
	Firm/Company	
	2409 ILLINOIS ST	
	Address	
	ORLANDO, FL 32803	
	City/State and Zip Code	
	Truyunlucky 83@gmail.com/Victor  E-mail address: (We be used for future annual report notification)	10 xie@gmail.co
For further i	nformation concerning this matter, please call:	
Liv	Yun at (321) 310 - 4147  Name of Person Area Code Daytime Telephone Number	
Enclosed is	a check for the following amount:	
\$25.00	Certificate of Status Certified Copy Certificat (additional copy is enclosed) Certified	e of Status &

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

pany as it now appears on our records.) d Liability Company)	
y were filed on	and assigned
bility company here:	
bility Company," the designation "LLC" or t	he abbreviation "L.L.C."
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	bility Company," the designation "LLC" or t  1111 E COLONIAL DR  ORLANDO FL 32803  1111 E COLONIAL DR

## 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

**ORLANDO** 

If Changing Registered Agent, Signature of New Registered Agent

Enter Florida street address

Florida 32803

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>	Name	<u>Address</u>	Type of Action
MGR	WU, LI WEI	2409 ILLINOIS ST	□ Add
		ORLANDO, FL 32803	Remove
			☐ Change
MGR	JIANG, JIANMIN	2409 ILLINOIS ST	
		ORLANDO, FL 32803	■ Remove
			Change
MGR	XIE, HAOXIANG	1111 E COLONIAL DR	B Add
		ORLANDO FL 32803	□ Remove
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If ame	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
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(If an effe Note: docume	ye date, if other than the date of filing:	ted as ti
	90th day after the record is filed.	
Dated _		į .
	Signature of a member or authorized representative of a member	·
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	Han X Tang XTQ Typed or printed name of signee  ### ### ### ### ###################	TARY OF ST

Filing Fee: \$25.00