

L17000123887

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K. SALY
JUL 20 2017

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: TOBACCO SHOP OF VENICE LLC

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:

JAMES LIU

Name of Person

TOBACCO SHOP OF VENICE LLC

Firm/Company

1191 US HIGHWAY 41 BYPASS. S

Address

VENICE, FL 34285

City/State and Zip Code

TOBACCOSHOP.VENICE@GMAIL.COM

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

For further information concerning this matter, please call:

RITA LIU

941

484-0959

at (_____) _____

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 Filing 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**

TOBACCO SHOP OF VENICE LLC

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

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TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on JUNE 06, 2017 and assigned
Florida document number L17000123887

This amendment is submitted to amend the following:

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

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: _____

(Principal office address MUST BE A STREET ADDRESS) _____

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:

Name of New Registered Agent: _____

New Registered Office Address: _____

Rita Liu

116898 Toledo Blade Blvd.
Enter Florida street address
Port Charlotte, Florida 33954
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>
AP	JACKSON LIU	16898 TOLEDO BLADE BLVD	<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AP	NANCY LIU	16898 TOLEDO BLADE BLVD	<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	RITA LIU	16898 TOLEDO BLADE BLVD	<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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TALLAHASSEE, FLORIDA

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

PLEASE CORRECT "RITA LIU" MANAGER TO REGISTERED AGENT STATUS IN THE ARTICLES OF
ORGANIZATION. RITA LIU SHOULD BE TITLED ONLY TO AS "REGISTERED AGENT" IN THE
BUSINESS.

NANCY LIU AND JACKSON LIU SHOULD BE REMOVED FROM THE BUSINESS. TOBACCO SHOP OF
VENICE LLC SHOULD BE LISTED TO AS SINGLE-MEMBER ENTITY.

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TALLAHASSEE, FLORIDA

E. Effective date, if other than the date of filing: AUGUST 01, 2017 **(optional)**

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

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.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:
(b) The 90th day after the record is filed.

Dated July 7th 2017

James Liu
Signature of a member or authorized representative of a member

JAMES LIU

Typed or printed name of signee