L17000146137

(Re	questor's Name)	
(4	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

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SUCRETARY OF STALE
TALL AHASSEE, FLORIDA

NOV LULL

COVER LETTER

	Registration So Division of Co			
		Cigar Lounge LLC		
SUBJEC	T:	Name of Lim	ited Liability Company	
The encl	osed Articles of	Amendment and fee(s) are sub	mitted for filing.	
		ondence concerning this matter		
		Hongbin Wei		
			Name of Person	
		Casablanca Cigar Lounge	LLC	
		- 171 - 17	Firm/Company	
		125 100th Ave NE		
			Address	
		Bellevue, WA, 98004		
			City/State and Zip Code	
		qiume611@gmail.com		
er e a			to be used for future annual repo	ort notification)
ror turtn	er information (concerning this matter, please c	au:	
Qiuyan \	rang		425 61529 at ()	
•	Name o	of Person	Area Code 1	Daytime Telephone Number
Enclosed	is a check for t	he following amount:		
■ \$25.4	00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclose	□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Addre Registration		<u>Street Addr</u> Registratio	
	Division of C	Corporations	Division o	f Corporations
	P.O. Box 631 Tallahassee,			e of Tallahassee Ionroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Casablanca Cigar Lounge LLC	6 11 1 19 6		
(Name of the Lim	ited Liability Company as it no (A Florida Limited Liability C	ompany)	
The Articles of Organization for this Limited I	Liability Company were file	ed on 7/7/2017	and assigned
Florida document number L17000146137	 '		
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name of	of the limited liability con	ipany here:	
The new name must be distinguishable and contain the	words "Limited Liability Compa	any," the designation "LLC" o	or the abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:		
(Principal office address MUST BE A STRE	ET ADDRESS)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B. If amending the registered agent and/or agent and/or the new registered office address	registered office address	on our records, <u>enter th</u>	e name of the new registered
Name of New Registered Agent:	Qiuyan Yang		
New Registered Office Address:	500 South Pointe Drive S	Ste160	
		Enter Florida street address	
	Miami Beach	, Flori	
	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

f 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>	Address	Type of Action
<i>.</i>			□Add
			□Remove
			□Add
			□Remove
			□Change
			□Add
		□Remove	
•			
			□Add
			□Remove
			□ Change
		Remove	
			□Add
		□Remove	
			□Change

Page 2 of 3

te: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as cument's effective date on the Department of State's records. record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of the 90th day after the record is filed. ted Signature of a member or authorized representative of a member		125 100th Ave NE, Bellevue, WA, 98004.
ective date, if other than the date of filing: (optional) (optio	-	2, We'd like to change the mailing address of Casablanca Cigar Lounge LLC as well, the new mailing address is :
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