

11/15/2018

L17000208319

2018-11-15 19:45:12 (GMT) 13058917717 From: Law Offices Tony Pornprinya

Division of Corporations

Florida Department of State
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Account Number : I20010000164
Phone : (305)893-8989
Fax Number : (305)891-7717

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**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
YIP FAST CHINESE CUISINE LLC**

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RE	FW: Please fax

COVER MESSAGE

Tony Pornprinya
1555 NE 123 Street
North Miami, FL 33161
Ph: 305-893-8989
Fax: 305-891-7717

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{{{H18000323387 3}}}
**ARTICLES OF AMENDMENT
 TO
 ARTICLES OF ORGANIZATION
 OF**

YIP FAST CHINESE CUISINE LLC

(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 10/09/2017 and assigned
 Florida document number L17000208319

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:

Enter Florida street address

Florida

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

(((H18000328887 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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AP	FILBERT S IP	3301 NE 183 St, Unit 2306 Aventura, FL 33150	☐ Add
			☐ Remove
			☐ Change
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			☐ Change

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

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TALLAHASSEE, FLORIDA

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 November 1 2018

Arthur

Signature of a member or authorized representative of a member

FILBERT'S IP

Typed or printed name of signer