1180000 4565

(Requestor's Name)
(Address)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
+

Office Use Only



400317585494

08/31/18--01006--016 **25.00

FILED 18 AUG 31 AM 8 2

O SIMMONS
SEP 0.8 2018

COVER LETTER

TO: Registration Section Division of Corpor				
SUBJECT:	ST LE! Name of Limi	Company LC Company		_
The enclosed Articles of Am	endment and fee(s) are subr	nitted for filing.		
Please return all corresponde	nce concerning this matter t	o the following:		
		Tra Hu Name of Person	(John H	lu)
	Q5-	T LED Firm Company	LLC	
	4700 (900 E Ste	74	
	Salt C	Address Address ACCITY City/State and Zip Code	<i>L</i> 7 8	<i>4117</i> .
	info Q 957 E-mail address: (1	tled . (o 19) o be used for future annual rep	oort notification)	_
For further information conc	erning this matter, please ca	II:		
Jia Hu (Joh)	n)	at (<u>9 o 9</u>) <u>9 o</u> Area Code	7 - 4533 Daytime Telephone Nu	ımber
Enclosed is a check for the fo	ollowing amount:			
\$25.00 Filing Fee 0	□ \$30,00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Ceri ed) Ceri	00 Filing Fee, tificate of Status & tified Copy ittonal copy is enclosed)

MAHLING 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

(Name of the Limited Liability Compan	LL C
The Articles of Organization for this Limited Liability Company of Florida document number 1 1 5 60000 4565 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company of the liability company of	were filed on \ \ \sqrt{0.5 \sqrt{2.0.178}} \text{ and assigned} \\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
The new name must be distinguishable and contain the words "Limited Liabili Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	ty Company." the designation "LLC" or the abbreviation "LLC" 4760 Miltoria BLVd. St. 175 Driano, T-L 32839
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	4700 Milleria Blud. #175-4067 Orlando, FL 32839
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here	fice address on our records, enter the name of the new
	Milleria Blvd Ste. 175 Enter Florida street address 10 Florida 32839 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. Thereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent: Signature of New Registered Agent

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>	Address	Type of Action
NGR	Jia Hu	4700 S. 900 E, Ste 24	🗖 Add
		Salt KKe (it, UT 8911	_ □ Remove
			Change prevs
			□ Remove
			Change
		$\equiv v$	D Add
			Remove Glange GAdd
			Change
			<u></u>
			Remove
			☐ Change
			Add
		· · · · · · · · · · · · · · · · · · ·	Remove
			Change
			🗖 Add
			🗖 Remove
			Change

									
					····				
	 								
								<u>.</u>	
								,* 	
								-	
				•				<u></u>	7-3
								- -	

		<u> </u>				<u></u>			
-					 -				
	== :							·	
		·							
i effective date i <u>te:</u> If the date	If other than the obligation of the first of the date must inserted in this blootive date on the Dep	be specific and ck does not n	cannot be freet the ap	plicable stat	t tiling or m	ire than 90 da		ing.) Pursoa	
he 90th da	cifies a delayed y after the reco	effective d rd is filed.	ate, but	not an ef	fective t	me, at 1	2:01 a.r	n. on the	e earlier
ed	5/29		7.0	-18		2			
	· · · · · · · · · · · · · · · · · · ·				/				
	;	ignature(of a i	nember or a	importsed tel	nesentative	or a member			

Page 3 of 3

Filing Fee: \$25.00