LISCCCO37772

(Re	questor's Name)	
(Ad	ldress)	
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<i>y</i>		
(Cit	ty/State/Zip/Phon	e #)
PICK-UP	MAIT	MAIL
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ν	-	
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

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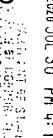


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S. YOUNG



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COVER LETTER

TO: **Registration Section Division of Corporations**

SUBJECT:	Miami Beach	International			
SOBJE.C1.	•	Name of Limite	ed Liability Company		
The enclosed	l Articles of Ar	nendment and fee(s) are subm	itted for filing.		
Please return	all correspond	ence concerning this matter to	the following:		
		Hongbin Wei			
			Name of Person	•	
		Miami Beach International			
			Firm/Company		
		1621 114th Ave SE Ste 132			
			Address		
		Bellevue, WA, 98004			
			City/State and Zip Code		
		qiume611@gmail.com	be used for future annual re	nort notification)	
				port normeation)	
For further in	iformation con	cerning this matter, please cal	l:		
Qiuyan Yang	Ā			2918	
	Name of P	erson	at () Area Code	Daytime Telepho	ne Number
Enclosed is a	check for the	following amount:			
□ \$25.00 F	filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 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 Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2020

Miami Beach International		
(<u>Name of the Limited Liability</u> (A Florida Li	Company as it now appears on our records.) imited Liability Company)	30
The Articles of Organization for this Limited Liability Con		30 Pand assigned
Florida document number L18000037772		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limite	d liability company here:	
The new name must be distinguishable and contain the words "Limited	d Liability Company," the designation "LLC" o	r the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRE.	<u> </u>	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered of agent and/or the new registered office address here:	office address on our records, <u>enter th</u>	e name of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
		el o
	, Flori , Flori	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>	Type of Action
Manager	KAUPER, GEORGE G, JR	500 South Pointe Drive STE 220	□Add
		MIAMI BEACH, FL 33139	■Remove
			Change
			□ Add
			Remove
			□Change
			□Add
			Remove
			□Change
			□Add
			Remove
			□Change
			□Add
			□Remove
			□Change
	- 		□Add
			□Remove
			Change

Page 2 of 3

500 South I	Pointe Dr Suite160, Mi	ımi Beach, I	FL, 33139				
							
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ective date. i	f other than the date	of filing:				(optional)	
effective date i	s listed, the date must be s inserted in this block of tive date on the Depart	ecific and ca oes not mee	nnot be prior to et the applicat	date of filing or ole statutory fil	more than 90 da ling requireme	iys after filing.) P nts. this date wi	ursuant to 605.020 II not be listed a
	cifies a delayed eff y after the record		e, but not	an effective	e time, at 12	2:01 a.m. or	the earlier o
ed	7/12	, .	2020	_ •			
		Hon	Jeles				
	Sign	tare of a men	mber or author	zed representati	ve of a member		

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