218000041341

	(Requestor's Name)
	(Address)
	(Address)
	(City/State/Zip/Phone #)
PICK-U	P WAIT MAIL
	(Business Entity Name)
	Document Number)
Certified Copies	Certificates of Status
Special Instructions	o Filing Officer:
	Office Use Only



800311318188

04/02/18--01040--011 **25.00

18 APR -2 ABTH: 47

APR 03 2018

COVER LETTER

TO: Registration Se Division of Cor		* * * * * * * * * * * * * * * * * * *	•
	AS DEVELOPMENT LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	indence concerning this matter	to the following:	
}		Name of Person	
	WISE TAX AND FINAN	CIAL SERVICES PLLC	
}		Firm/Company	
	8837 OAK LANDINGS C	TT .	
Ì		Address	
Į.	ORLANDO FL32836		
		City/State and Zip Code	
	li-mail address: (to be used for future annual report noti	tication)
For further information c	oncerning this matter, please c		nearrow
	oncerning this matter, preade o		
JIA FEI		407 408-7517 at ()	
Nar ic o	f Person	Area Code Daytim	e Telephone Number
Enclosed is a check for the	ne 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)
мац.	ING ADDRESS:	STREET/COUR!	IER ADDRESS:
	ration Section	Registration Section	
	on of Corporations ox 6327	Division of Corpo Clifton Building	rations
	assee, FL 32314	2661 Executive Co Tallahassee, FL 32	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

LUXVIDLAS DEVELORMENT LLC	
(<u>Name of the Limited Liability Company as it</u> (A Florida Limited Liability	now appears on our records.) Company)
The Articles of Organization for this Limited Liability Company were fi	led on and assigned
forida document number L18000041341	
his amendment is submitted to amend the following:	
. If amending rame, <u>enter the new name of the limited liability co</u>	mpany here:
he new name must be distinguishable and contain the words "Limited Liability Com	pany," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
Principal office address MUST BE A STREET ADDRESS)	<u> </u>
)	Al.
nter new mailing address, if applicable:	
Mailing address MAY BE A POST OFFICE BOX)	
t. If amending the registered agent and/or registered office accepts the new registered office address here:	idress on our records, enter the name of th
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	, Florida
Cit	v 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 miffied 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>Vame</u>	Address	Type of Action
AMBR	FENG WANG	11644 BRIGHTSTOWE WAY	Add
		ORLANDO. FL 32836	Remove
			□ Change
MGR	XIAO PANG	11644 BRIGHTSTOWE WAY	■ Add
		ORLANDO, FL 32836	☐ Remove
			☐ Change
			☐ Remove
			Change
			☐ Remove
		.	☐ Change
			☐ Remove
			Change
			Remove
			Change

D. If ame	ending a	ny other information, enter change(s) here: (Attach additional sheets, if necessar	y.)
			 _
-			
-			<u> </u>
-			
-		······································	
-			
-			<u></u>
-			<u></u>
-			``````````
-			
-	·		·
-			
_			
(If an efi <u>Note:</u>	fective date If the da	i other than the date of filing:	(.) Pursuant to 605,0207 (3)
(b) The	90th d	ecties a delayed effective date, but not an effective time, at 12:01 a.m. ay after the record is filed.	
Dated		3/29/2018	
		- and Man G Signature of a preriber or authorized representative of a member	
		Typed or printed name of signee	
		1	

Page 3 of 3

Filing Fee: \$25.00