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(Requ	uestor's Name)	
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PICK-UP	☐ WAIT	MAIL
(Busi	ness Entity Name)
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Certified Copies	Certificates o	f Status
Special Instructions to Fil	ing Officer:	





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June 22, 2021

LEONARD TITONE MBA 12995 S. CLEVELAND AVE STE 160 FORT MYERS, FL 33907

SUBJECT: 3LRC LLC

Ref. Number: L18000086544

We have received your document for 3LRC LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The specific purpose of the entity must be set forth in the document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Yvette Scott Document Specialist II

Letter Number: 921A00014027

RECEIVED SEP 2 1 2021

Division of Company tions D.O. DOY COOR M. II. 1

COVER LETTER

TO: Registration Section

Division of Co	orporations						
3 LRC LI	c						
SUBJECT:	Name of Lir	nited Liability Company					
	of Amendment and fee(s) are subsondence concerning this matter	_					
	Leonard Titone MBA, CP	A					
	-	Name of Person					
	CPA Tax Advisors Inc						
		Firm/Company					
	12995 S Cleveland Ave S	te 160	연	202			
		Address	D C C C C C C C C C C C C C C C C C C C	<u> </u>			
	Fort Myers, FL 33907		TAR				
	admin@cpataxadvisors.net	City/State and Zip Code	38.94 40.54	CT -2 PH 2			
		to be used for future annual report no	ည်က	∾ 🧲			
For further information	concerning this matter, please of	•	THE THE	8			
Leonard Titone MBA, (CPA	855 740-1040 at ()					
Name	of Person	Area Code Dayti	me Telephone Number	_			
Enclosed is a check for	the 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 Certificate of Certified Cop (additional copy	Status &			
Mailing Addre Registration Division of O P.O. Box 632	Section Corporations	Street Address: Registration S Division of Co	orporations				
Tallahassee,		The Centre of Tallahassee 2415 N. Monroe Street, Suite 810					

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

3 LRC LLC			
(Name of the Lin	(A Florida Lim	ompany as it now appears iited Liability Company)	on our records.)
The Articles of Organization for this Limited	Liability Comp	pany were filed on Apri	105, 2018 and assigned
Florida document number L18000086544			•
This amendment is submitted to amend the fo	llowing:		
A. If amending name, enter the new name	of the limited	liability company her	<u>e</u> :
Qiguang Chen PLLC			
The new name must be distinguishable and contain the	words "Limited I	Liability Company," the des	ignation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if appli	icable:	NA	
Principal office address MUST BE A STRE			
			
			c) 2
Enter new mailing address, if applicable:		NA	021 (ECR TAL
Mailing address MAY BE A POST OFFICE BOX)			A 2 7
			AS 2
			2 P 2 P
3. If amending the registered agent and/or	registered offi	ice address on our rec	
gent and/or the new registered office addre	ess here:		IIE 18
Name of New Registered Agent:	NA		
New Registered Office Address:	NA	· 	
		Enter Florida	a street address
	NA		, Florida ^{NA}
		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

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

Title	Name	Address	Type of Action
NA			□Add
			ПRетюче
			□Add
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fective date, if other than th	e date of filing:			(o	ptional)		
on effective date is listed, the date muote: If the date inserted in this b	ast be specific and can	not be prior to d	te of filing or mo	e than 90 days a	fter filing.)	Pursuan	it to 605.02
ocument's effective date on the I	Department of State	's records.	statutory ming	requirements,	uns date	WIII HOE	oc listed
ecord specifies a delayed effecti is filed.	ve date, but not an	effective time,	at 12:01 a.m. o	the earlier of	(b) The	90th d	ay after ti
April I	2						
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Typed or printed name of signee