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## **COVER LETTER**

TO:	Registration Se Division of Cor			
eun i	o.cov.	YA GUAN FLO	ORIDA, LLC	
SUBJI	EC1:	Name of Lim	ited Liability Company	
The en	closed Articles of A	Amendment and fec(s) are sub	mitted for filing.	
Please	return all correspon	ndence concerning this matter	to the following:	
		HOU. FENGC	HAO	
			Name of Person	
		YA GUAN FL	ORIDA, LLC	
			Firm/Company	
3250 NE 1 AVE STE 118				
			Address	
MIAMI, FL 33137				
			City/State and Zip Code	
			@GMAIL.COM to be used for future annual report notification)	
For fur	ther information co	oncerning this matter, please co	,	
	HOU, FENGCH	•	786 354 1708	
	Name of	Person	Area Code Daytime Telepho	one Number
Enclos	ed is a check for th	e following amount:		
<b>≡</b> \$2	5.00 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 S		Street Address: Registration Section	
	Division of Co P.O. Box 632	orporations	Division of Corporation	
	Tallahassee, F		The Centre of Tallahas 2415 N. Monroe Stree Tallahassee, FL 32303	t, Suite 810

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

TA GUAN FLORIDA, LLC		
(Name of the Limited Liability Compan (A Florida Limited Li	y as it now appears on our records.) ability Company)	
The Articles of Organization for this Limited Liability Company volume to Clorida document number L18000097168	vere filed on 04/18/2016	and assigned
his amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabil	ity company here:	
he new name must be distinguishable and contain the words "Limited Liabilit	y Company," the designation "LLC" or	the abbreviation "L.L.C."
Inter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS)	NON	E 🚉 🗲
		<u> </u>
		72: = =
Inter new mailing address, if applicable:	1/0/7	2.7.71
Mailing address MAY BE A POST OFFICE BOX	NONI	
		5 <b>2</b>
. If amending the registered agent and/or registered office adgent and/or the new registered office address here:	idress on our records, <u>enter the</u>	name of the new regi
Name of New Registered Agent:		
New Registered Office Address:	NONE	
	Enter Florida street address	
	, Floric	la
	City	Zin 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 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>	Name	Address	Type of Action
MGR	YUANYUAN WANG	8173 NW 47TH TER APT #2410	[i]Add
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			⊡Add
			□Remove
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		06/01/2024	<b>.</b>			
ective date, if other than an effective date is listed, the date	he date of fil must be specific	ing:and cannot be prior	to date of filing or	more than 90 day	( <b>optional</b> ) s after filing.) Pur	auant to 605.020
te: If the date inserted in thicument's effective date on the	s block does no	ot meet the applic	able statutory fil	ing requirement	s, this date will	not be listed a
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ecord specifies a delayed effe	tive date, but 1	not an effective ti	me, at 12:01 a.π	n. on the earlier	of: (b) The 90t	h day after th
is filed.						
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		Tung ohe fa member or author	o Her	<u>_</u>		