118000102800

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
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2/02/21

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COVER LETTER

TO: Registration 8 Division of Co			
SUBJECT:	Toro Gn	oup LLC.	
	Name of Lin	nited Liability Company	
The enclosed Articles o	f Amendment and fec(s) are sub	omitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
		an Nguyeu Name of Operson	
		Firm/Company	
	108 2	ancaster Way	
	Roya/	Palm Beach, FL City/State and Zip Code Cup 777@ amail to be used for future about report noti	33414
	Toro Granil address: (to be used for future almust report noti	fication)
For further information of	concerning this matter, please co	all:	
Tuan N Names	quye n Person	at (<u>561</u>) <u>763</u> Area Code Daytim	-5543 e Telephone Number
Enclosed is a check for t	he following amount:		
₩ \$25.00 Filing Fee	S30.00 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)
Mailing Address Registration S Division of C P.O. Box 632	Section orporations	Street Address: Registration Sec Division of Cor	porations
1.O. DOX 032	1	The Centre of T	ananassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Compa (A Florida Limited	C.	s on our records.)	
(A Florida Limited	Liability Company)		
The Articles of Organization for this Limited Liability Company	were filed on $\underline{\mathcal{L}}$	14/24/2018	_ and assigned
Florida document number <u>L18000102800</u> .			-
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ility company her	<u>re</u> :	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the de	signation "LLC" or the abbr	eviation "L.L.C."
Enter new principal offices address, if applicable:			20
(Principal office address MUST BE A STREET ADDRESS)			<u> </u>
			<u>.: 量 ៕</u>
			. 19
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
			27
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our re	cords, <u>enter the name (</u>	of the new registered
Name of New Registered Agent:			
New Registered Office Address:			
riegistered ettiee rightess.	Enter Florid	la street address	
		, Florida	
	Ciry	•	Zip Code
New Registered Agent's Signature, if changing Registered Agent:			
I hereby accept the appointment as registered agent and agre- provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of n provided for in Ch	ny duties, and I am fan napter 605, F.S. Or, if	niliar with and this document is

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>	Address	Type of Action
MGR	Ngoc Truong	108 Lancaster Way Royal Palm Beach, FL 3341	□Add
		Royal Palm Beach, FL 3341	14 Remove
			□Change
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			□Remove
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(If an effective Note: If the	ate, if other than the date is listed, the date must date inserted in this blo effective date on the De	be specific and c ck does not me	annot be prior to	to date of filing o	r more than 90 d ling requireme	_(optional) ays after filing.) ints, this date w	Pursuant to 602 vill not be list	5.0207 ed as	(3)(the
f the record spececord is filed.	rifies a delayed effective	date, but not a	n effective tin	ne, at 12:01 a.i	n. on the earlie	rof:(b) The	90th day afte	r the	
Dated	1/09/21	,		=	7				
_			<u></u>	-MD					
	``	ignature of a me	ember or author	nzed fépreséntat	ive of a member				

Filing Fee: \$25.00