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Tallahassee, FL 32314

TO: Registration S Division of Co			
AIXOXIX	. WEI, LLC		
SUBJECT:		nited Liability Company	
	f Amendment and fee(s) are sub		
Please return all corresp	ondence concerning this matter	to the following:	
	Yuqing Xiong		
		Name of Person	
	XIAOXIA WEI, LLC		
	 	Firm/Company	
	4529 NW 35TH TER		
		Address	
	GAINESVILLE, FL 32605	5	
		City/State and Zip Code	
	yqxiong71@gmail.com E-mail address: (to be used for future annual report notification)	
For further information	concerning this matter, please ca		
Yuqing Xiong		352 2149720	
Name	of Person	at ()	
Enclosed is a check for	the following amount:		
□ \$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	(additional copy is enclosed) Certified C	of Status &
<u>Mailing Addre</u> Registration		Street Address: Registration Section	
	Corporations	Division of Corporations The Centre of Tallahassee	

2415 N. Monroe Street, Suite 810

Tallahassee. FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

XIAOXIA WEI, LLC	111111111111111111111111111111111111111			
(Name of the Limit	(A Florida Limited I	ny as it now appears on ou liability Company)	r records.)	
The Articles of Organization for this Limited L	iability Company	were filed on 04/26/201	8 and assigned	
Florida document number L18000105367	·			
This amendment is submitted to amend the foll	owing:			
A. If amending name, enter the new name o	f the limited liab	ility company here:		
Blue Link Realty LLC				
The new name must be distinguishable and contain the w	ords "Limited Liabil	ity Company," the designati	on "LLC" or the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:		2233 NW 41st Street, Suite 500		
(Principal office address MUST BE A STREET ADDRESS)		GAINESVILLE, FL 32	?606	
Enter new mailing address, if applicable:		2233 NW 41st Street, S	Suite 500	
(Mailing address MAY BE A POST OFFICE BOX)		GAINESVILLE, FL 3.	2606	
B. If amending the registered agent and/or ragent and/or the new registered office addre	•	address on our records	, enter the name of the new registe	
Name of New Registered Agent:				
New Registered Office Address:	2233 NW 41st 5	Street, Suite 500		
new the gistered of the Address.		Enter Florida stre	et address	
	GAINESVILLI		, Florida <u>32606</u>	
		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 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	<u>Address</u>	Type of Action
			□Add
			□Remove
			Change
			□Add
			□Remove
			□Change
			□Add
			Change
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Effective date, if other than the first an effective date is listed, the date means that the date inserted in this document's effective date on the	ust be specific an block does not	nd cannot be prior meet the applic	able statutory fil		2	
e record specifies a delayed effect	ive date, but no	ot an effective ti	me, at 12:01 a.m	i. on the earlier o	f: (b) The 90th da	ay after the
rd is filed.		2023				
rd is filed.		2023			_	
rd is filed.	Signature of a		orized representati	ve of a member	_	

Filing Fee: \$25.00