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PALLAHASSEE FLORIDA

SEP 22 ZO18 S. YOUNG

## **COVER LETTER**

Division of Cor					
SUBJECT: Stor	Le Village FL	ILC.			
	V Name of Lim	ited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return all correspo	ndence concerning this matter	to the following:			
	<u>C</u>	hen, Hsilling Name of Person			
		Stone Village FL	uc.		
	169 C +			18 1810	
		house 54 Address		SEP 2	TE
	Inverne:	City/State and Zip Code		1 PH SEE, FI	
	Sjolo E-mail address: (	City/State and Zip Code  NG 2002 (A Gmail - Code)  to the used for future annual report notifi	Em	18 SEP 21 PH 5: 17	
For further information c	oncerning this matter, please c				
Chen, H	siuling	$\frac{1}{\text{Area Code}} = \frac{352}{\text{Area Code}} + \frac{270 - 18}{\text{Daytime}}$	819		
Name o	f Person U	Area Code / Daytine	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)	Certified	te of Status &	
MAIL	ING ADDRESS:	STREET/COURI	ER ADDRESS:		

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Stone	Village FL LLC.
(Name of the Limite	d Liability Company as it now appears on our records.) A Florida Limited Liability Company)
The Articles of Organization for this Limited Lia Florida document number <u>L1800018300</u>	ability Company were filed on $\frac{e7/31/2018}{}$ and assigned
This amendment is submitted to amend the follo	wing:
A. If amending name, enter the new name of	the limited liability company here:
NA	
The new name must be distinguishable and contain the wo	ords "Limited Liability Company." the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applica	ıble:
(Principal office address MUST BE A STREET	T.ADDRESS)
Enter new mailing address, if applicable:	SEP TO SE
(Mailing address MAY BE A POST OFFICE E	BOX)
	( <b>5.</b> 2. 기계
B. If amending the registered agent and/oregistered agent and/or the new registered off	or registered office address on our records, enter the hame of the nev
registered agent andor the new registered on	ice authors nete.
Name of New Registered Agent:	Chen, Hsiuling Same.
New Registered Office Address:	Same.  Enter Florida street address
	, Florida
	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, <u>enter the title, name, and address of each person\_being added or removed from our records</u>:

MGR =	Manager
AMBR =	Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
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an effective date.  ote: If the date	if other than the d is listed, the date must be inserted in this bloc ctive date on the Dep	e specific an k does not	nd cannot be p meet the ap	rior to date of plicable statt	filing or more		er filing.) Pursu	
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