## UB000 198882

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## **COVER LETTER**

Division of Cor					
BROTHER SUBJECT:	RS FARM GROUP LLC				
	Name of Lim	nited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
	SULING WU				
		Name of Person			
	BROTHERS FARM GRO	UP LLC			
		Firm/Company			
	15655 SW 54 COURT		2	2019 APR	-
		Address		APA APA	
	MIRAMAR, FL 33027		i c	PR - L	
	SWU108@YAHOO.COM	City/State and Zip Code		A R 18	D
	E-mail address: (	to be used for future annual report notifi	ication)	ADA	
For further information c	oncerning this matter, please c	all:	•		
SULING WU		786 586-0161			
Name o	f Person	at () Area Code Daytime	Telephone Number	<del></del>	
Enclosed is a check for t	he following amount:				
□ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified (	of Status &	

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BROTHERS FARM GROUP INC.				
(Name of the Limited Liability Compa (A Florida Limited	any as it now appears on our reco Liability Company)	rds.)		
The Articles of Organization for this Limited Liability Company	were filed on August 7, 2018	and assigned		
Florida document number 1.18000188882				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liab	ility company here:			
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LI	LC" or the abbreviation "L.L.C."		
Enter new principal offices address, if applicable:	15655 SW 54 COURT			
(Principal office address MUST BE A STREET ADDRESS)	MIRAMAR, FL 33027	·		
		2018 ALL		
		AH AH T		
Enter new mailing address, if applicable:	15655 SW 54 COURT	ASS -		
(Mailing address MAY BE A POST OFFICE BOX)	MIRAMAR, FL 33027			
D. If any ordinary the provider of a court and the court and the	er	7 Dr		
B. If amending the registered agent and/or registered or registered agent and/or the new registered office address her		ds, enter the mame of the new		
Name of New Registered Agent:				
New Registered Office Address:				
	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, 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>	<u>Address</u>	Type of Action
MGRM	SULING WU	15655 SW 54 COURT, MIRAMAR, FL 33027	<b>⊟</b> Add
		<del></del>	□ Remove
	XUCUI WU	15655 SW 54 COURT.	Change
AMBR		MIRAMAR, FL 33027	Add
			☐ Remove
AMBR	SUHONG WU	15655 SW 54 COURT,	Change
		MIRAMAR, FL 33027	Add
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		March 2	9-2019			
fective date, if other t	han the date of	f filing:		<del></del>	(optional)	
n effective date is listed, the te: If the date inserted i	n this block does	s not meet the ap	plicable statutory			
cument's effective date	on the Departmen	nt of State's reco	rds.			
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record specifies a o The 90th day after t			not an enect	ive time, at 12	01 a.m. on	the earlier
Manual 20		2010				
ited March 29		. 2019	·			
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Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00