L18000 250377

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
7/26/21 TM

Office Use Only



100369203941

100369203941 07/06/21~01016~020 **25.00

21 JUL -6 PH 1:31

COVER LETTER

TO:

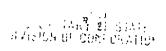
Tallahassee, FL 32314

ΓΟ: Registration Se Division of Cor			
	N HAMLIN LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	WANG,WENWEI		
		Name of Person	
	VENETIAN HAMLIN LL	C	
		Firm/Company	
	16418 NEW INDEPENDE	ENCE PKWY#110	
		Address	
	WINTER GARDEN, FL 3	4787	
		City/State and Zip Code	
	FLTAXSERVICE@GMAII		<u> </u>
For further information c	oncerning this matter, please of	to be used for future annual report notit	(Cattor)
	Niceroning and plants of present of	•••	
N	f Person	at () Area Code Davtimo	e Telephone Number
Name o	r reison	Area Code Daythic	receptione realities
Enclosed is a check for th	ne following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy tadditional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addres		Street Address:	
Registration S Division of C		Registration Sec Division of Cor	
P.O. Box 632		The Centre of T	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



21 JUL -6 PM 1:31

1.7723-1777	4 3 1	714				, .
VENET	$\mathbf{A} \mathbf{N}$	114	MI	IN I	- 1	[

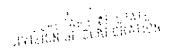
(Name of the Limited Liability Company as it now appears on our records.)

()	A Florida Limited Liabi	lity Company)		
The Articles of Organization for this Limited Liab Florida document number <u>L18000250377</u>	bility Company wer	e filed on 10/24/2018	and assigned	
This amendment is submitted to amend the follow				
A. If amending name, enter the new name of t	he limited liability	company here:		
NONE The new name must be distinguishable and contain the wor				
The new name must be distinguishable and contain the wor	ds "Limited Liability C	ompany," the designation "LI	LC" or the abbreviation "L.L.C."	
Enter new principal offices address, if applical	ole:	NONE		
(Principal office address MUST BE A STREET				
(Mailing address MAY BE A POST OFFICE BO B. If amending the registered agent and/or reg agent and/or the new registered office address	istered office addr		er the name of the new registere	
agent and/or the new registered office address				
Name of New Registered Agent:	NONE			
New Registered Office Address:				
	Enter Florida street address			
		, I	Florida	
New Registered Agent's Signature, if changing Rej		S 11,1	esp Centi	
I havely assent the appointment as venictored		court in this committee I t	Conthan arrives to assume with the	

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>	<u>Name</u>	Address 21 JUL -6 PH 1:31	Type of Action
AMBR	LI. XUELIAN	13800 SW 73RD STMIAMI, FL 33183	🗀 Add
			■Remove
			Change
			□Add
			Remove
			□Change
			□Add
			□Remove
			□Change
		 	□Add
			□Remove
			[]Change
			□Add
			□Remove
			□Change
			□Remove
			□ Change

	nation, enter change(313193034315	Coa+ (Well'12
NONE			21 JUL -	5 PM	1:31
<u> </u>					·
			<u></u>		
			 .		
					-
	-				
		_			
					
					•
	-				
-					
		·		-	
			-	_	
ective date, if other than the defective date is listed, the date in this beautiers of the date inserted in this beautiers, effective date on the I	ust be specific and cannot bollock does not meet the	e prior to date of filir applicable statutor	ng or more than 90 c	_ (opti d lays after ents, this	Glove A Pursuant to 605 020
cord specifies a delayed effecti s tiled.	ve date, but not an effec	tive time, at 12:01	a.m. on the earli	er of: (b) The 90th day after the
- 47 7					
07/02 ed	. 2021	·			
ed	·	·			

Filing Fee: \$25.00