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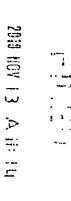
(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	: #)
PICK-UP	WAIT	MAIL
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(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

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## **COVER LETTER**

TO:	Registration So Division of Cor			
CUDI	YUAN GC			
SUBJ	ECT:	Name of Limi	ted Liability Company	
The e	nclosed Articles of	Amendment and fee(s) are subt	mitted for filing.	
Please	e return all correspo	ondence concerning this matter (	to the following:	
		David Fong		
		<del></del>	Name of Person	
		Fong & Associates, LLC		
			Firm/Company	
		1221 E Robinson St		
			Address	
		Orlando, FL 32801		
		david@fongtax.com	Name of Person  Firm/Company  Address  City/State and Zip Code  (to be used for future annual report notification) call:	
		E-mail address: (t	to be used for future annual report notifi	cation)
For fi	irther information c	concerning this matter, please ca	ali:	
Davi	d Fong			
	Name o	of Person	Area Code Daytime	Telephone Number
Enclo	sed is a check for t	he following amount:		
<b>■</b> \$	25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	Certified Copy	Certificate of Status &

MAILING ADDRESS:

TO:

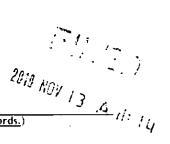
Registration Section Division of Corporations P.O. Box 6327

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



YUAN GOLF, LLC

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

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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
AMBR	WEI XIE	550 TIMACUAN BLVD, LAKE MARY, FL 32746	
			Remove
			Change
			Remove
			Change
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ffective date, if other than the an effective date is listed, the date mus sote: If the date inserted in this blocument's effective date on the D	ock does not meet the applic	able statutory filing requi		
e record specifies a delayed The 90th day after the rec		t an effective time, a	at 12:01 a.m. on the ea	ırlier o
November 8	2018			
		01		
	Signature of a member or author	128		_

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00