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PICK-UP	☐ WAIT	MAIL
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SECREDARY OF STATE

Amend

DEC 1 6 2019
I ALBRITTON

COVER LETTER

TO:	Registration Se Division of Cor			
		BBQ SEAFOOD & GRILL LL	C.	
SUBJE	CT:	Name of Lim	ited Liability Company	
		Amendment and fee(s) are sub		
i icase i	eturi an correspo	JIN CHEN	to the tolkowing.	
			Name of Person	
		JIN CHEN CPA, PA.		
			Firm/Company	
		9270 BAY PLAZA BLVI) STE 604	
			Address	
		TAMPA, FL 33619		
		JINCHENCPAPA@GMAIL.	City/State and Zip Code COM	
		E-mail address: (to be used for future annual report notifi	cation)
For furt	her information e	oncerning this matter, please ca	all:	
HE YO	NG LIU		916 256-7873	
	Name o	f Person	Area Code Daytime	Telephone Number
Enclose	ed 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 (additional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
	MAII	ING ADDRESS:	STREET/COURIE	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**

ARTICLES OF O	RGANIZATION	يب
OI	7	12.5° 12.5°
HAWAII BBQ SEAFOOD & GRILL LLC		題るか
(<u>Name of the Limited Liability Compan</u> (A Florida Limited L	y as it now appears on our rec ability Company)	and assigned is
The Articles of Organization for this Limited Liability Company of	vere filed on	and assigned
Florida document number L18000266904		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabil	ity company here:	
The new name must be distinguishable and contain the words "Limited Labili	y Company," the designation "I	A.C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
	,	
B. If amending the registered agent and/or registered off		rds, enter the name of the new
registered agent and/or the new registered office address here	:	
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street ade	lress
		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
MGR	JIANWANG YANG	17788 APRILE DRIVE	Add
		LUTZ, FL 33558	
			■ Remove
			Change
MGR	BINGQING YANG	17788 APRILE DRIVE	■ Add
		LUTZ, FL 33558	
		-	☐ Remove
			☐ Change
			□ Add
			Remove
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Tective date, if other than the in effective date is listed, the date mustote: If the date inserted in this blooment's effective date on the December 2.	be specific and cannot be project does not meet the app	ior to date of filing or mor licable statutory filing	(optional) e than 90 days after filing.) Pursuant to requirements, this date will not be	i 605,0207 Histed as
record specifies a delayed The 90th day after the reco	effective date, but ord is filed.	not an effective tir	<u>ne,</u> at 12:01 a.m. on the e.	arlier of
11/14/2019 nted	2019	·		
			a member	

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00