

L 19000030592

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To: Division of Corporations  
Fax Number : (850)617-6383

From: Account Name : ARAZOZA & FERNANDEZ-FRAGA P.A.  
Account Number : 076624003440  
Phone : (305)444-6226  
Fax Number : (305)442-4829

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
YI USA HOLDINGS LLC

Certificate of Status	1
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**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** YI USA HOLDINGS LLC  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

LAURA KOHN  
Name of Person  
ARAZOZA & FERNANDEZ-FRAGA P.A.  
Firm/Company  
2100 SALZEDO STREET, SUITE 300  
Address  
CORAL GABLES, FL 33134  
City/State and Zip Code  
LAURA@ARAZOZA.COM  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

LAURA KOHN at ( 305 ) 444-6226 EXT 233  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the 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)

**Mailing Address:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

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**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

YI USA HOLDINGS LLC

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

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DIVISION OF CORPORATIONS  
2021 DEC 16 AM 10:17

The Articles of Organization for this Limited Liability Company were filed on 01/30/2019 and assigned  
Florida document number L19000030592.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

7825 NW 29TH STREET

SUITE 137

DORAL, FL 33122

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

7825 NW 29TH STREET

SUITE 137

DORAL, FL 33122

**B. If amending the registered agent and/or registered office address on our records, 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 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.*

X

If Changing Registered Agent, Signature of New Registered Agent

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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>	<u>Type of Action</u>
MGR	RAVEE R. B. NANDWANI	7825 NW 29TH STREET	<input type="checkbox"/> Add
		SUITE 137	<input type="checkbox"/> Remove
		DORAL, FL 33122	<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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