

8/28/2019

Division of Corporations

L19000051686

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H19000260493 3)))



H19000260493ABC1

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

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

From:

Account Name : LAW OFFICES TONY PORNPRIYA
Account Number : 120010000164
Phone : (305)893-8989
Fax Number : (305)891-7717

2019 AUG 28 PM 12:20

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN TOA TOA 1988, LLC

Certificate of Status	1
Certified Copy	0
Page Count	04
Estimated Charge	\$30.00

AUG 29 2019

M. SOLOMON

Electronic Filing Menu

Corporate Filing Menu

Help

(((H19000260493 3)))

COVER LETTER**TO: Registration Section
Division of Corporations****SUBJECT: TOA TOA 1988, 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:

Tony Pornprinya

Name of Person

Law Office of Tony Pornprinya

Firm/Company

1555 NE 123 Street

Address

North Miami, FL 33161

City/State and Zip Code

nyc@miamidadelaw.net

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Tony Pornprinya

305 893-8989

at (_____) _____

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

(((H19000260493 3)))

(((H19000250493 3)))

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

TOA TOA 1988, LLC

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

The Articles of Organization for this Limited Liability Company were filed on 02/21/2019 and assigned
Florida document number L19000051686.

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)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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.

If Changing Registered Agent, Signature of New Registered Agent

(((H19000260493 3)))

(((H19000260493 3)))

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	BOTU YE	10001 W ATLANTIC BLVD, APT 118 CORAL SPRINGS FL 33071	☐ Add ☒ Remove ☐ Change
MGR	YUEMING LU	3882 NW 67TH WAY LAUDERHILL, FL 33319	☐ Add ☒ Remove ☐ Change
MGR	YUK HEY KONG	3245 RIVERSIDE DR, APT D-103 CORAL SPRINGS FL 33065	☒ Add ☐ Remove ☐ Change
			☐ Add ☐ Remove ☐ Change
			☐ Add ☐ Remove ☐ Change
			☐ Add ☐ Remove ☐ Change

2019 AUG 28 PM 12:20

(((H19000260493 3)))

((H19000260493.3)))

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

2018 AUG 28 PM 12:20

E. Effective date, if other than the date of filing: _____ (optional)

Effective date, if other than the date of filing: _____ (optional)
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0267 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated AUGUST 28 2019

Handwritten signature: *W. H. L.*

YONGCHANG LI

Typed or printed name of signer

((H19000260493 3)))