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COVER LETTER

TO:	Registration Se Division of Cor				
CHDIE		AB CRESTVIEW LLC			
SUBJE	-1: <u></u>	Name of Limi	ted Liability Company		
The encl	osed Articles of	Amendment and fee(s) are sub-	nitted for filing.		
Please re	eturn all correspo	ndence concerning this matter	to the following:		
		CARRIE ZHONG			
			Name of Person		
		CLS BUSINESS CENTER	INC.		
		_	Firm/Company	 -	
		2 ALLEN ST UNIT 4G			
		····-	Address		
		NEW YORK, NY 10002			
			City/State and Zip Code		
		CLSNYC3@GMAIL.COM			
		E-mail address: (1	o be used for future annual report notifica	ation)	3 34
For furth	ier information c	oncerning this matter, please ca	ill:		
CARRI	E ZHONG		212 925-8366 at ()		23 GAS
	Name o	f Person	Area Code Daytime T	elephone Number	28 00 00 00 00 00 00 00 00 00 00 00 00 00
Enclosed	t is a check for th	he following amount:			H I I B
■ \$2 5.	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 Sta Certified Copy (additional copy is e	e. atus &

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	B CRESTVIEW LLC	
(<u>Name of the Limited Liability (</u> (A Florida Li	Company as It now appears on our records.) mited Liability Company)	
The Articles of Organization for this Limited Liability Con Florida document number L19000063180	npany were filed on 03/05/2019	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	d liability company here:	
The new name must be distinguishable and contain the words "Limited	Liability Company," the designation "LLC" or t	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		-
(Principal office address MUST BE A STREET ADDRES	<u> </u>	
Enter new mailing address, if applicable:		<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)		- U
		٠ ٠ ٠ ٠ ٠ ٠ ٠ ٠ ٠ ٠ ٠ ٠ ٠ ٠ ٠ ٠ ٠ ٠ ٠
		18 CT 6
B. If amending the registered agent and/or register		iter the name of the pe
registered agent and/or the new registered office addres	s nere:	<u>م</u> يَ
Name of New Registered Agent:		·
New Registered Office Address:		
	Enter Florida street address	-
	, Florid	
	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>	Address	Type of Action
AMBR	YANFENG HUANG	21711 73RD AVE #2	■ Add
		OAKLAND GDNS, NY 11364	Nuu
			Remove
			Change
AMBR	SHENG QUN HUANG	10916 US HWY 98 W STE A	-
		MIRAMAR BEACH, FL 32550	Add
			☐ Remove
			Change
AMBR	JIA QIANG ZHANG	4216 AUGUSTA DR	5
		GULF SHORES, AL 36542	B Add
			☐ Remove
			☐ Change
AMBR	YI LAN LIU	35 MARKET ST APT 3C	5
		NEW YORK, NY 10002	Add
			☐ Remove
			☐ Change
AMBR	DE DONG LIU	504 TIKELL DR	5
 		CRESTVIEW, FL 32536	Add
			☐ Remove
			□ Change
AMBR	WANG YANG	2418 S WENTWORTH	5
		CHICAGO, IL 60616	Add
			☐ Remove
			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	Type of Action
AMBR	ZHI TAO ZOU	3152 137TH ST	Add
		FLUSHING, NY 11354	Remove
		<u> </u>	☐ Change
AMBR	JUN SHENG ZHANG	3508 ST IVES BLVD	\ \ _ Add
		SPRING HILL, FL 34609	☐ Remove
			☐ Change
AMBR	LI BIN CHEN	228 CITADEL LN	⊠ Add
		CRESTVIEW, FL 32539	□ Remove
			Change
			□ Remove
			Change
			Add
			☐ Remove
			☐ Change
			Add
			Remove
			☐ Change

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fective date, if other than the neffective date is listed, the date mote: If the date inserted in this becament's effective date on the I	ust be specific and cannot be polock does not meet the ap	prior to date of filing or m plicable statutory filin		ng.) Pursuant to 605.0207
record specifies a delaye The 90th day after the re		not an effective t	ime, at 12:01 a.m	n. on the earlier of
ted	2019			
	han sho			

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00