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COVER LETTER

TO:	Registration Se Division of Cor			
	Wancheng	•		
SUBJE	CCT:		ited Liability Company	
The end	closed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please	return all correspo	ondence concerning this matter	to the following:	
		Wei Han		
		Wancheng LLC DBA PMI	Name of Person PrimeHome	
			Firm/Company	····
		5323 Millenia Lakes Blvd	• •	
			Address	
		Orlando FL32839		
		han@pmiprimhome.com	City/State and Zip Code	
		E-mail address: (to be used for future annual report notif	ication)
		oncerning this matter, please ca		
Wei Ha	an		407 9885554	
	Name o	f Person	at () Area Code Daytime	Telephone Number
Enclose	ed is a check for th	ne following amount:		
■ \$2:	5.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address Registration S		Street Address: Registration Sec	tion

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Wancheng LLC	
(<u>Name of the Limited Liability Company</u>) (A Florida Limited Liab	as it now appears on our records.) offity Company)
The Articles of Organization for this Limited Liability Company we lorida document number	ere filed on Apr 04 2019 and assigned
his amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability	y 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)	
	2
	020
Enter new mailing address, if applicable:	DEC F
Mailing address MAY BE A POST OFFICE BOX)	<i>5</i> 1
	P : □
-	-
B. If amending the registered agent and/or registered office add agent and/or the new registered office address here:	ress on our records, enter the name of the new regist
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 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	Hao Li	6400 MAIN STREET 102 MIAMI LAKES, FL 33014	□Add
			= Remove
			Change
MGR	Han Chen Tsai	453 S Deerwood Ave Orlando, FL 32825	= Add
			□Remove
			Change
			Change
			To Remove
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□ Change
			🗆 🗖 Add
			□ Remove
			Chanca

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ctive date, if other than th		(optional)
\cong If the date inserted in this t	lock does not meet the applicable statutory f	or more than 90 days after filing.) Pursuant to 605.02 filing requirements, this date will not be listed
iment's effective date on the l	Department of State's records.	
ord specifies a delayed effecti	ve date, but not an effective time, at 17:01 a	.m. on the earlier of: (b) The 90th day after the
filed.	ate, out not an effective time, at 12.01 a.	in. of the carrier of. (b) The 20th day after the
Dec 11th	2020	
d		
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