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COVER LETTER

	gistration Sec ision of Com			
CHDIECT.	CHINA EX	PRESS TAKEOUT LLC		
SUBJECT:		Name of Lim	ited Liability Company	
The enclosed	1 Articles of A	Amendment and fee(s) are sub	mitted for filing.	
		ndence concerning this matter	-	
		FANG YAO HE		
			Name of Person	
			Firm/Company	
		1250 SEMINOLE BL VD	STE 5	
		LARGO, FL. 33770	Address	
		tina08151980@gmail.com	City/State and Zip Code	
		E-mail address: (t	to be used for future annual report notif	ication)
For further in	ıformation co	ncerning this matter, please ca	all;	
FANG YAC	HE	Person	at () Area Code	
	Name of	Person	Area Code Daytime	: Telephone Number
Enclosed is a	check for the	e following amount:		
■ \$ 25,00 F	iling 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

STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CHINA EXPRESS TAKEOUT L	_C		
(Name of the Lim	ited Liability Company as it no (A Florida Limited Liability Co	w appears on our records.) mpany)	F11_1
The Articles of Organization for this Limited I	Liability Company were file	d on <u>08/20/2019</u>	and assigned
Florida document number L19000113630			
This amendment is submitted to amend the fol	lowing:		₩ 12
A. If amending name, enter the new name of	of the limited liability com	pany here:	
The new name must be distinguishable and contain the	words "Limited Liability Compa	iv," the designation "LLC" or the	abbreviation "LLC."
Enter new principal offices address, if appli	, ,		
			· ····································
(Principal office address MUST BE A STRE)	<u> </u>		
			
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE	<u>BOX)</u>		
B. If amending the registered agent and		ress on our records, ente	er the name of the nev
registered agent and/or the new registered o	ffice address here:		
	FANG YAO HE		
Name of New Registered Agent:			·
New Registered Office Address:	1250 SEMINOLE BL VI	STE 5	
	1	enter Florida street address	
	LARGO	, Florida	33770
	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
P	WEI ZHANG	1250 SEMINOLE BL VD STE 5 LARGO, FL. 33770	🗀 Add
			В Кетюче
		····	□ Change
P	FANG YAO HE	1250 SEMINOLE BL VD STE 5 LARGO, FL, 33770	
			□ Remove
			Change
			□ Remove
			Change
			Add
			Remove
			☐ Change
			□ Add
			Пепюче
		-	□ Change
			☐ Add
			Remove
			☐ Change

				
				
				
				
				
				
E. Effective date, if other than the date (If an effective date is listed, the date must be Note: If the date inserted in this block document's effective date on the Department.	e specific and cannot be prior k does not meet the applic	r to date of filing or more the cable statutory filing req	(optional) an 90 days after filing.) Pursuant to uirements, this date will not be	605.0207 (3)(the listed as the
f the record specifies a delayed ebb. The 90th day after the recor	effective date, but no d is filed.	ot an effective time	, at 12:01 a.m. on the ea	arlier of:
DatedAUGUST 20	2019			
х —				
.\				

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Typed or printed name of signee

Filing Fee: \$25.00