

L19000189516

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

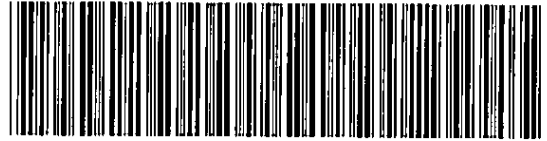
(Business Entity Name)

(Document Number)

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SEP 03 2019

2019 SEP 3 11 5:38

Amend

SEP 12 2019

1 ALBUQUERQUE

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Orchid Massage 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:

Xue hua Qiu  
Name of Person

Orlando Therapy  
Firm/Company

11701 International Dr # 320 A  
Address

Orlando FL 32821  
City/State and Zip Code

CRMTO82@yahoo.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Xue hua Qiu at (929) 312 9092  
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

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

Orchid Massage LLC

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

2019 SEP -3 PM 5:38

The Articles of Organization for this Limited Liability Company were filed on 07/24/2019 and assigned Florida document number L19000189516

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)**

11701 International Dr  
Ste # 320 A  
Orlando, FL 32821

**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:

Xue hua Qiu

New Registered Office Address:

11701 International Dr # 320A

Enter Florida street address

Orlando

City

Florida

32821

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.*

Xue hua Qiu

**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>	<u>Type of Action</u>
MGR	Bi Hua Qiu	13018 prairie meadows Dr	<input type="checkbox"/> Add
		Orlando, FL 32837	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Xue hua Qiu	11701 International Dr	<input checked="" type="checkbox"/> Add
		# 320 A Orlando FL 32824	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Change

[illegible]

08/25/2019

**(optional)**

**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.

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

Dated Aug 22<sup>nd</sup>, 2019

*Arachidonic*

Signature of a member or authorized representative of a member

Xue Hua Qiu

Typed or printed name of signee