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(Requestor's Name)
(Address)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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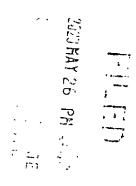
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7/20/23 VLH



COVER LETTER

TO: **Registration Section Division of Corporations**

AVN REA	L ESTATE HOLDING LLC				
	Name of Lin	nited Liability Company			
The enclosed Articles of	Amendment and fee(s) are suit	bmitted for filing.			
Please return all corresp	ondence concerning this matter	to the following:			
		Name of Person			
	WISE TAX AND FINAN	CIAL SVC			
	Firm/Company				
	7208 W SAND LAKE RD	STE 305			
		Address			
	ORLANDO FL 32819				
		City/State and Zip Code	······································		
	E-mail address: (to be used for future annual report notific	cation)		
For further information of	oncerning this matter, please ca	all;			
JIA FEI		407 408-7517			
Name o	f Person		Telephone Number		
Enclosed is a check for the	ne 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 Address: 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

ars on our records.)
9/11/2019 and assigned
<u>iere</u> :
designation "LLC" or the abbreviation "L.L.C."
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26
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records, enter the name of the new regist
rida street address

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.

City

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	JING NING	121 S. ORANGE AVE. STE 1430A	≅ Add
		ORLANDO, FL 32801	□Remove
			□Change
			□ Add
			⊡Кепюче
			□ Change
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If an effective date is Note: If the date i	other than the date listed, the date must be sponserted in this block do we date on the Departm	ecific and cannot be prior ses not meet the applic	r to date of filing or mor cable statutory filing :		g.) Pursuant to 605.0207 (
e record specifies a rd is filed.	delayed effective date.	but not an effective t	time, at 12:01 a.m. on	the earlier of: (b)	The 90th day after the
Dated	=//0	202	3		
		3001	norizod representative of		
	Signat	ure of a member or auth	ionzed representative of	a member	