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FUL LINK [USA],	LLC		
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			Art of Inc. File LTD Purtnership File
			Foreign Corp. File
			L.C. File S Fictitious Name File S Trade/Service Mark Merger File S
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			Art. of Amend. File
			RA Resignation
			Dissolution / Withdrawal
			Annual Report / Reinstatement
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			Photo Copy
			Certificate of Good Standing
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COVER LETTER

Division of Co					
	K [USA], LLC, a Florida limite	ed liability			
SUBJECT.	Name of Li	mited Liability Company			
The enclosed Articles o	f Amendment and fee(s) are su	bmitted for filing.			
Please return all corresp	oondence concerning this matte	r to the following:			
	Carlos de Cespedes, Esq.				
	Halpern Rodriguez, LLP	Name of Person			
	355 Alhambra Circle, Sui	Firm/Company te 1101		2019 007 10	
	Coral Gables, Florida, 331	Address			
	eric.zhu@bjhanfeng.com.co			9: 27	
For firsther in Comment		to be used for future annual report notif	ication)		
	concerning this matter, please o	all:			
Carlos de Cespedes, Esq	<u></u>	305 442-8883 at ()			
Name o	of Person	Area Code Daytime	: Telephone Number		
Enclosed is a check for the	he following amount:				
□ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified (of Status &	
MAIL	ING ADDRESS:	STREET/COURIE	ER ADDRESS:		

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FUL LINK [USA], LLC, a Florida Limited Liability Company

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on September 25, 2019 and assigned Florida document number L19000235046 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: FULL LINK [USA], LLC, a Florida Limited Liability Company The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." 300 South Pointe Drive Enter new principal offices address, if applicable: Suite 2004 (Principal office address MUST BE A STREET ADDRESS) Miami Beach, Florida, 33139 300 South Pointe Drive Enter new mailing address, if applicable: Suite 2004 (Mailing address MAY BE A POST OFFICE BOX) Miami Beach, Florida, 33139 B. If amending the registered agent and/or registered office address on our records, enter the name of the registered agent and/or the new registered office address here: Φ N Name of New Registered Agent: New Registered Office Address: Enter Florida 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.

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 Title Name Address Type of Action □ Add □ Remove ☐ Change □ Add ☐ Remove ☐ Change Remove __ Change ___ ☐ Remove □ Change □ Add ☐ Remove ☐ Change □ Add ☐ Remove ☐ Change

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October 10, 2019 fective date, if other than the date of filing: n effective date is listed, the date must be specific and cannot be prior to date of filing or ote: If the date inserted in this block does not meet the applicable statutory filicument's effective date on the Department of State's records.	(optional) more than 90 days after filing.) Pursuant to 605.0 ing requirements, this date will not be listed	0207 d as
record specifies a delayed effective date, but not an effective The 90th day after the record is filed.	time, at 12:01 a.m. on the earlie	r of
October 10 2019		
Signature of a member or authorized representative		

Page 3 of 3

Filing Fee: \$25.00

PREPARED BY: CARLOS DE CESPEDES, ESQ. 355 ALHAMBRA CIRCLE SUITE 1101 CORAL GABLES, FLORIDA, 33134

AMENDED ARTICLES OF ORGANIZATION OF FULL LINK [USA], LLC, a Florida Limited Liability Company

PREAMBLE

We, the undersigned, do hereby associate ourselves under the following Articles, for the purpose of forming a limited liability company under the laws of the State of Florida.

ARTICLE I

<u>NAME</u>

The name and principal place of business of the limited liability company shall-be:

FULL LINK [USA], LLC, a Florida Limited Liability Company 300 South Pointe Drive Suite 2004 Miami Beach, Florida, 33139

ARTICLE II

GENERAL NATURE OF BUSINESS

The general nature of the business to be transacted by this limited liability company is:

(1) To engage in any activity or business permitted under the laws of the United States and the State of Florida, except business governed by other regulatory statutes.

ARTICLE III

LIMITED LIABILITY COMPANY POWERS

This Limited company shall have all powers now and hereafter granted Limited Liability Companies for profit under the laws of the State of Florida.

ARTICLE IV

TERM OF EXISTENCE

This limited liability company shall exist perpetually.

ARTICLE V

MANAGEMENT

(1) The business of this limited liability company shall be conducted by the following Authorized Member:

NAME
Zhu Yufeng
Authorized Member

ADDRESS
300 South Pointe Drive, Suite 2004,
Miami Beach, Florida, 33140

ARTICLE VI

STREET ADDRESS AND DESIGNATION OF REGISTERED AGENT

FULL LINK [USA], LLC, a Florida Limited Liability Company, desiring to organize under the laws of the State of Florida, has designated its principal office and mailing address at 300 South Pointe Drive, Suite 2004, Miami Beach, Florida, 33139 and has named as its initial Registered Agent, Carlos de Cespedes, Esq., whose address is 355 Alhambra Circle, Suite 1101, Coral Gables, Florida, 33134.

DATED this 10 day of October, 2019

By:

Carlos de Cespedes, as Attorney for _____ OFULL LINK [USA], LLC, a Florida Limited Liability Company

ACKNOWLEDGMENT OF REGISTERED AGENT

I, Carlos de Cespedes, having been named to accept Service of Process for FULL LINK [USA], LLC, a Florida Limited Liability Company, at the place designated in article I of the attached Articles of Organization, I hereby accept to act in this capacity, accepting the duties as Registered Agent, and agree to comply with the provisions of said act relative to keeping open said office.

DATED this 100 day of October, 2019.

By:

Carlos de Cespedes Registered Agent