

170000022597

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

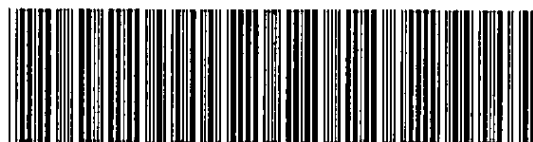
(Business Entity Name)

(Document Number)

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03/03/22--01006--015 **30.00

22 MAR -2 PM 1:15

T. MATTHEWS

MAR 10 2022

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Ping An Financial Services PTE 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:

Jayson Lopez -Sole Member
Name of Person
Ping An Financial Services PTE LLC
Firm/Company
5354 Bay Side Dr.
Address
Orlando, FL 32819
City/State and Zip Code
jayson.lopez@hotmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jayson Lopez 407 409-1150
Name of Person at () Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|---|--|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input checked="" type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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**

Ping An Financial PTE LLC

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

22 MAR -2 PM 1:15

The Articles of Organization for this Limited Liability Company were filed on 1-15-2020 and assigned
Florida document number L20000022597

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)

5354 Bay Side Dr.

Orlando, Florida 32819

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

Same

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:

Jayson Lopez

New Registered Office Address:

5354 Bay Side Dr

Enter Florida street address

Orlando,

City

Florida 32819

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>	<u>Type of Action</u>
MGRM	Jayson Lopez	5354 Bay Side Dr. Orlando Fl 32819	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGRM	Ping An Financial Services LTD	C/O FMS Lawyer PL	<input type="checkbox"/> Add
		950 S. Pine Island Rd, Ste: A-150 PMB #2388	<input checked="" type="checkbox"/> Remove
		Plantation, Florida 33324	<input type="checkbox"/> Change
AP	Frank Smith	c/o FMS Lawyer PL	<input type="checkbox"/> Add
		950 S. Pine Island Rd, Ste: A-150 PMB #2388	<input checked="" type="checkbox"/> Remove
		Plantation, Florida 33324	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Jayson Lopez is the Sole Member by Statute formed this LLC in anticipation of new Member investment which did not materialize as promised. I have filed this amendment because of this fact. I added verified documented facts in a SWORN AFFIDAVIT AND DECLARATION filed with this Amendment.

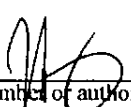
E. Effective date, if other than the date of filing: _____ **(optional)**

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

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.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated February 26, 2022



Signature of a member or authorized representative of a member

Jayson Lopez-Owner Member

Typed or printed name of signee