L20 000095099

(Requestor's Name)
(Address)
(Address)
(121100)
(Cit. (Chab. 7:- IDh ann 40
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



300346779453

06/29/20--01012--016 **25.00



S. YOUNG

COVER LETTER

TO: Registration Se Division of Co			i •
FREMONI) LLC		.
30bJEC1	Name of Lim	ited Liability Company	
		7	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Tian Le		
		Name of Person	
	FREMOND LLC		
		Firm/Company	
	8308 Xanthus Ln		
		Address	
	Wellington		
		City/State and Zip Code	
	E-mail address: (to be used for future annual report noti	fication)
For further information of	concerning this matter, please c		
Tian Le		561 5605911 at ()	
Name o	of Person		e Telephone Number
Enclosed is a check for t	he following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 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

FREMOND LLC		. 23
(<u>Name of the Limited</u> (A	Liability Company as it now appears on our records.) Florida Limited Liability Company)	720 JUN
The Articles of Organization for this Limited Liab	ility Company were filed on 04/02/2020	and assigned
Florida document number L20000095099	·	
This amendment is submitted to amend the follow	ing:	6.
A. If amending name, enter the new name of the	ne limited liability company here:	
The new name must be distinguishable and contain the word	ls "Limited Liability Company," the designation "LLC" or	r the abbreviation "L.L.C."
Enter new principal offices address, if applicab	te:	
(Principal office address MUST BE A STREET.	ADDRESS)	
		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BO	<u></u>	<u> </u>
		· · · · · · · · · · · · · · · · · · ·
B. If amending the registered agent and/or reg agent and/or the new registered office address I		e name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	Floric	
	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 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
MGR	KAO CHUNG LIN	Address: NO.141, UANESUS, S	EC, 24 AN HOIKOAD,
		AN-WAN-DISION	TATINAVA
			Remove
			Change
			□Add
			□Remove
		· · · · · · · · · · · · · · · · · · ·	□Change
			□ Add
			□Remove
			□Change
			□Add
			□Remove
			□ Change
			□Add
			□Remove
			Change
			□ Remove

-	
-	
-	
_	
-	
-	
_	
-	
-	
_	
-	
-	
_	
ecti	6/26/2020 (entional)
eff	ive date, if other than the date of filing: 6/26/2020 (optional) ective 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 605.020
<u></u>	If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a ent's effective date on the Department of State's records.
cor	d 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
s fil	ed.
	6/25/2020
ed	
ed .	Mr
ted _.	Signature of a member or authorized representative of a member

Filing Fee: \$25.00