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FILED 1022 APR -4 AM 10: 39 SECRETARY OF STATE STALLAHASSEE. FL

## COVER LETTER

TO:

	tration Sec ion of Corp					
		NG AUTO L.L.C.				
SUBJECT: _		Name of Lim	ited Liability Company	, 2, 4, 4, 4		
The enclosed /	Articles of A	amendment and fee(s) are sub	mitted for filing.			
Please return a	ll correspon	dence concerning this matter	to the following:			
		Wenyu Zhang				
			Name of Person			
		LIL ZHANG AUTO L.L.C	•			
			Firm/Company			
		3549 Stonefield Dr				
			Address			
		Orlando, FL 32826				
		1 - 1000	City/State and Zip Code			
		zhangwenyu7@gmail.com		Control of the contro		
For further info	ormation co	E-mail address: (	to be used for future annual reportable:	notification)		
Wenyu Zhang			321 240-017 at ( )	0		
Name of Person		Area Code Da	ytime Telephone Number			
Enclosed is a c	heck for the	e following amount:				
□ \$25.00 Fil	ing 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		Street Addres Registration				
Division of Corporations			Division of	Division of Corporations		
- · <del>-</del> -	Box 6327 hassee, F			of Tallahassee nroe Street, Suite 810		

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

LIL ZHANG AUTO L.L.C.		2022 APR -1, AM 10: 20		
(Name of the Limited Lia (A Fig	bility Compa orida Limited I	Liability Company)  SECRETARY OF STATE were filed on 02/16/202 LAHASSEE. Fand assigned		
The Articles of Organization for this Limited Liabilit	y Company	were filed on 02/16/2021 LAHASSEE. Fand assigned		
Florida document number L21000079265	·			
This amendment is submitted to amend the following	<b>g</b> :			
A. If amending name, enter the new name of the	limited liab	ility company here:		
ZHANG BA PI LLC				
The new name must be distinguishable and contain the words "	Limited Liabil	lity 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)		3549 Stonefield Dr		
		Orlando, FL 32826		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		3549 Stonefield Dr		
		Orlando, FL 32826		
B. If amending the registered agent and/or registered agent and/or the new registered office address her		address on our records, enter the name of the new register		
Name of New Registered Agent: We	Wenyu Zhang			
New Registered Office Address: 3549 Stonefield		i Dr		

## 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.

Cirv

Orlando

If Changing Registered Agent, Signature of New Registered Agent

Enter Florida street address

\_, Florida 32826
Zip Code

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>	Name	Address	Type of Action
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