h21000209975

(Re	questor's Name)	
(Add	dress)	
(Add	dress)	
(City	y/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu:	siness Entity Nam	e)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to I	Filing Officer:	
ĺ		1

Office Use Only



800369209918

11/11/2001 117 117 117 1171

7/2/2

COVER LETTER

TO:

	Registration Sec Division of Corp			
	N & T Host	ings LLC		
SUBJECT	Γ:	Name of Limi	ted Liability Company	
The enclo	sed Articles of .	Amendment and fee(s) are sub-	mitted for filing.	
Please rett	arn all correspo	ndence concerning this matter	to the following:	
		TUYET BUI		
			Name of Person	
		N & T Hostings LLC		
			Firm/Company	
		2017 UPLAND ROAD		
			Address	
		WEST PALM BEACH, FL	_ 33406	
			City/State and Zip Code	
		N&THosting@gmail.com	to be used for future annual report noti	(fleetion)
For furthe	er information c	e-man address: () oncerning this matter, please ca		incariony
TUYET	เบเ		206 681-6950	
	Name o	f Person	Area Code Daytim	ne Telephone Number
Enclosed	is a check for th	ne following amount:		
□ \$25.0	00 Filing Fee	☐ \$30,00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	■ \$60.00 Fiting Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
_	Mailing Addres Registration :		Street Address: Registration Se	ection
3	Division of C	lorporations	Division of Co.	rporations
	P.O. Box 632 Tallahassee, l		The Centre of " 2415 N. Monro	Tallahassee be Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

bility Company as it now appears on our records.) rida Limited Liability Company)	
y Company were filed on MAY 05, 2021	and assigned
;;	
imited liability company here:	
Limited Liability Company," the designation "LLC" or the ab	breviation "L.L.C."
DRESS)	
	····
<u> </u>	
	_
	e of the new regis
<u>.</u>	
	<u>~`</u>
Enter Florida street address	
, Florida	Zip Code
Citv	·
	imited liability company here: Limited Liability Company," the designation "LLC" or the ab DRESS) cred office address on our records, enter the name: Enter Florida street address, Florida

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
AMBR	NHUNG MACH	4035 32ND AVENUE SW	
		SEATTLE, WA 98126	
			Change
			□Add
			Remove
			□Change
			🗖 Add
			□Remove
			Change
-			□ Add
			□Remove
			□ Change
			Add .
			□ Remove □ Change
			☐ Change
			□Remove
			□ Change

		<u></u>
	1.3	
		<u></u>
·		
		
ffective date, if other than the an effective date is listed, the date mote: If the date inserted in this locument's effective date on the	ust be specific and cannot be prior to date of filing or more d block does not meet the applicable statutory filing rec	(optional) nan 90 days after filing.) Pursuant to 605,020 quirements, this date will not be listed a
record specifies a delayed effect is filed.	ve date, but not an effective time, at 12:01 a.m. on th	ne earlier of: (b) The 90th day after the
JULY 2	2021	
ateu	, 10	
	// wyet/Si	
	Signature of a member or authorized representative of a	member \
		-)

Filing Fee: \$25.00