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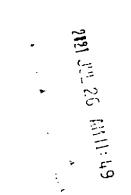
(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
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(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



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COVER LETTER

TO: Registration Se Division of Co			·		
POR KEE,					
SUBJECT:	Name of Lim	ited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return all corresp	ondence concerning this matter	to the following:			
	YINSI LIN				
		Name of Person			
	POR KEE, LLC.				
		Firm/Company			
	5307 72ND ST. E.				
		Address			
	BRADENTON, FL 34203				
		City/State and Zip Code			
	YINSILIN0512@GMAIL.COM E-mail address: (to be used for future annual report notification)				
For finther information	concerning this matter, please c	•			
YINSI LIN		415 812-9 69 3			
Name	of Person		ne Telephone Number		
Enclosed is a check for t	the following amount:				
■ \$25.00 Filing 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 Addre		Street Address:			
Registration Division of 0		_	Registration Section Division of Corporations		
DIVISION OF C	-	The Centre of	-		

P.O. Box 6327 Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

POR KEE, LLC.		<u>, </u>	_	
(Name of the Limited Liabili (A Florida	ity Company as a Limited Liabili	it now appears on our rec ty Company)	ords.)	
he Articles of Organization for this Limited Liability C	Company were	filed on 05/06/2021		and assigned
lorida document number L21000212333	<u>_</u> .			
his amendment is submitted to amend the following:				
. If amending name, enter the new name of the lim	uited liability	company here:		
he new name must be distinguishable and contain the words "Lim	nited Liability Co	ompany," the designation "l	.LC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		544 PALMBRUSH TRA	IL.	
		BRADENTON, FL 34202		
				2191
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		07 72ND ST. E.		<u> </u>
		ADENTON, FL 34203		. 2
				====================================
 If amending the registered agent and/or registere 	ed office addr	ess on our records, <u>en</u>	ter the na	me of the new reg
gent and/or the new registered office address here:				· · · · · · · · · · · · · · · · · · ·
Name of New Registered Agent: YINS	II LIN			
New Registered Office Address: 5307	72ND ST. E.			
-		Enter Florida street ada	bess	
BRAL	DENTON		Florida :	
	•	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 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 = Anthorized Member

<u>Title</u>	Name	Address	Type of Action
			□Add
			□Remove
			□Change
			□ Add
			□Remove
			□Change
			Add
			Add ☐Remove
			☐Change
			□Change □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □
			□Remove
			□Change
			□Add
			□Remove
			Change
			□Add

	721
	P3
fective date, if other than the date of filing:	(optional)
n effective date is listed, the date must be specific and cannot be poster. If the date inserted in this block does not meet the app	rior to date of filing or more than 90 days after filing.) Pursuant to 605.02 plicable statutory filing requirements, this date will not be listed
cument's effective date on the Department of State's recor	
	re time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
is filed.	
JULY 22 2021	
ited , 2021	·
,	
14.	uthorized representative of a member