L21000350932

	(Requestor's Name)
	(Address)
	(Address)
	(City/State/Zip/Phone #)
PICK-U	P WAIT MAIL
	(Business Entity Name)
	(Document Number)
Certified Copies	Certificates of Status
Special Instructions	s to Filing Officer:

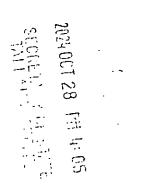
Office Use Only





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COVER LETTER

TO:

Registration Section

DIVISIO	n or Corp	porations			
DC SUBJECT:	INVES	TMENT LLC			
SUBJECT:		Name of Lim	ited Liability Company		
The enclosed Art	ticles of	Amendment and fec(s) are sub	mitted for filing.		
		ndence concerning this matter	_		
		Lei Cheng			
			Name of Person		
		DG INVESTMENT LLC			
			Firm/Company	<u>.</u>	
		13371 N. 56th St		200	
			Address	Plan oct 28 Plan och 1971	•
		Tampa, FL 33617		7 28	
		leicheng@gmail.com			
			to be used for future annual report noti	fication)	シ
For further infort	mation co	oncerning this matter, please co	alt:		
Lei Cheng			813 4010576 at ()		
	Name of	Person		e Telephone Number	
Enclosed is a che	eck for th	e following amount:			
■ \$25.00 Filin	g 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)	
Regist Divisio P.O. B	lox 632	ection orporations	Street Address: Registration Se Division of Cor The Centre of T 2415 N. Monro Tallahassee, FI	porations fallahassee e Street, Suite 810	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

DG INVESTMENT LLC		
(Name of the Limited Liability Compar (A Florida Limited L	y as it now appears on our records lability Company)	5.)
The Articles of Organization for this Limited Liability Company of Iorida document number <u>L21000350932</u> .	were filed on	and assigned
lorida document number		
his amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	lity company here:	
he new name must be distinguishable and contain the words "Limited Liabili	ty Company," the designation "LLC"	or the abbreviation "L.L.C."
nter new principal offices address, if applicable:		5 20 10
Principal office address MUST BE A STREET ADDRESS)		<u> </u>
	<u> </u>	72
		ω
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		9
		;;;
3. If amending the registered agent and/or registered office a	ddress on our records, <u>enter</u>	the name of the new registe
gent and/or the new registered office address here:		
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	;
		orida
	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	Leo Chen	13371 N 56TH ST, TAMPA FL 33617	= Add
			□Remove
			Change
			□Add
			□Remove
			Change
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			Change
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	listed, the date m nserted in this	nust be specific a block does not	and cannot be pri t meet the appl	licable statutor			Pursuant to 605.020 will not be listed a
record specifies a is filed.	delayed effect	tive date, but n	ot an effective	time, at 12:01	a.m. on the ea	rlier of: (b) The	e 90th day after the
			_,				
10/23/2024 nted	-						
10/23/2024 ated		Signature of	a member or au	thorized represe	ntative of a mem	her	