11/19/24, 4:12 PM

Division of Corporations



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To:

Division of Corporations

Fax Number : (850)617-6383

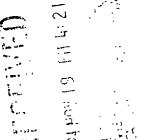
From:

Account Name : COMPUTERSHARE Account Number : 110432003053 Phone : (561)694-8107

Fax Number : (561)214-8442

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. Ø

Email /	\ddress:		
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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN BILLNIE INTERNATIONAL LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

Electronic Filing Menu Corporate Filing Menu

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BILLNIE INTERNATIONAL LLC					
(Name of the Limit	ed Liability Compa (A Florida Limited l	iny as it now appears on ou Liability Company)	ir records.)		
The Articles of Organization for this Limited L Florida document number L21000355804	iability Company	were filed on $\frac{08/06/20}{}$	21	and assigned	
This amendment is submitted to amend the following	owing:				
A. If amending name, enter the new name of	f the limited liab	ility company here:			
The new name must be distinguishable and contain the w	ords "Limited Liabi	lity Company," the designati	ion "LLC" or the abbr	eviation "L.L.C."	
Enter new principal offices address, if applic	able:	7901 4th St N #24467			
(Principal office address MUST BE A STREET ADDRESS)		St. Petersburg, FL, 33702, USA			
			5	50	
Enter new mailing address, if applicable:		7901 4th St N #24467			
(Mailing address MAY BE A POST OFFICE BOX)		St. Petersburg, FL, 337	702, USA		
				6.	
				3	
B. If amending the registered agent and/or ragent and/or the new registered office address	~	address on our records	s, <u>enter the name</u> - ্ৰ ন		<u>re</u> 1
Name of New Registered Agent:	Corporate Crea	tions Network Inc.		<u> </u>	1
New Registered Office Address:	801 US Highwa	ay I			
		Enter Florida stre	et uddress		
	North Palm Bea	 	, Florida _3340	8	
		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.

/s/ Kunning Chen Kunning Chen, Special Secretary
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 = Authorized Member

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

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ective date, if other than the one effective date is listed, the date must te. If the date inserted in this bloom was a feet in the Date of the Date o	be specific and cannot be prior to d ck does not meet the applicable	ate of filing or more than 90 day	(optional) s after filing.) Pursuant to 605.020 s, this date will not be listed a
cument's effective date on the De	pariment of State's records.		
ecord specifies a delayed effective is filed.	date, but not an effective time,	at 12:01 a.m. on the earlier	of: (b) The 90th day after the
ted November 19	2024		
	/s/ Kunning Chen		
		d representative of a member	

Filing Fee: \$25.00