

h22 000049628

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

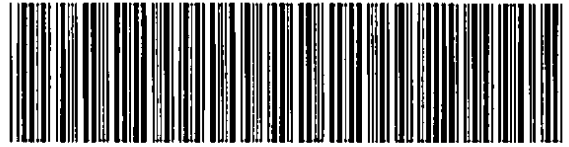
(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800385970038

05/02/22 --01032--013 --\$25.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
2022 MAY -2 AM 9:05

J DENNIS
JUN 23 2022

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Coco Breeze LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Henry (Lixun) Cui

Name of Person

Coco Breeze

Firm/Company

10042 Halesia Woods Dr.

Address

Orlando, FL 32832

City/State and Zip Code

henrycui0505@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Henry LixunCui

Name of Person

at (929)

Area Code

231 7321

Daytime Telephone Number

Enclosed is a check for 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 Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

CoCo Breeze LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 01/28/22 and assigned
Florida document number L22000049628.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Henry Lixun Cui LLC

The new name must be distinguishable and contain the words "Limited Liability 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)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

Henry Lixun Cui

New Registered Office Address:

Enter Florida street address

City

Florida

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.

Henry Lixun Cui

If Changing Registered Agent, Signature of New Registered Agent

MGR = Manager
AMBR = Authorized Member

AMBR = Authorized Member

		<input type="checkbox"/> Add
		<input type="checkbox"/> Remove
		<input type="checkbox"/> Change
		<input type="checkbox"/> Add
		<input type="checkbox"/> Remove
		<input type="checkbox"/> Change
		<input type="checkbox"/> Add
		<input type="checkbox"/> Remove
		<input type="checkbox"/> Change
		<input type="checkbox"/> Add
		<input type="checkbox"/> Remove
		<input type="checkbox"/> Change
		<input type="checkbox"/> Add
		<input type="checkbox"/> Remove
		<input type="checkbox"/> Change

[illegible]

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated 04/12/2022.

Henry Lixun. Cui
Typed or printed name of signee

Filing Fee: \$25.00

MINOR IN DISADVANTAGE



No. 43257308

CERTIFICATE OF NATURALIZATION

Personal description of holder
as of date of naturalization:

Date of birth: MAY 05, 1989

Sex: MALE

Height: 5 feet 08 inches

Marital status: MARRIED

Country of former nationality:
CHINA

USCIS Registration No. A206 285 394

I certify that the description given is true, and that the photograph affixed hereto is a likeness of me.

Henry Lix Cui
(Signature and true signature of holder)

Best known that, pursuant to an application filed with the Secretary of Homeland Security.

at: ORLANDO, FLORIDA

The Secretary having found that:

HENRY LIXUN CUI

residing at:

ORLANDO, FLORIDA

having complied in all respects with all of the applicable provisions of the naturalization laws of the United States, being entitled to be admitted as a citizen of the United States, and having taken the oath of allegiance at a ceremony conducted by

US DISTRICT COURT, MIDDLE DISTRICT FL

at: ORLANDO, FLORIDA

on: FEBRUARY 24, 2022

such person is admitted as a citizen of the United States of America.

W. M. Judd

U. S. Citizenship and Immigration Services



ALTERNATION OF NAME OF THIS DOCUMENT IS A FEDERAL OFFENSE AND YOU SHALL BE



Petition for Name Change
Department of Homeland Security
U.S. Citizenship and Immigration Services

USCIS
Form N-662

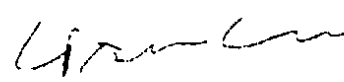


Name of Court
United States District Court, Middle District of Florida, Orlando Division

A-206285394

Information About You (Petitioner)

As part of the naturalization process, you have the opportunity to legally change your name. Please complete Item Number lines 1 - 8. (Type or print clearly.)

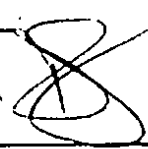
1. Full and Correct Name (Current Name)
Given Name (First Name) LIXUN Middle Name CUI Family Name (Last Name) CUI
2. Mailing Address
Street Number and Name 10042 HALESLA WOODS DR City or Town ORLANDO State FL ZIP Code 32832-7920
3. Country of Citizenship or Nationality China 4. Date of Birth (mm/dd/yyyy) 05/05/1989 5. Alien Registration Number (A-Number) A-206285394
6. ☒ I certify that I am not seeking a change of name for any unlawful purpose such as the avoidance of debt or evasion of law enforcement.
7. I petition the court to change my name to:
First Name HENRY Middle Name LIXUN Last Name CUI
8. Signature and Date
Signature of Petition (Use your current name)  Date (mm/dd/yyyy) 11/29/2021

Certification of Name Change

I certify that the above petition was granted by the court on this date, 02/24/2022

(mm/dd/yyyy)

Signature of Clerk Elizabeth M. Warren

Signature of Deputy Clerk 

Important Information

Your copy of this petition, along with your Certificate of Naturalization, which you will receive upon taking the oath of allegiance, will verify that you elected to change your name. Your Certificate of Naturalization bears your new name as changed per order of the court.