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COVER LETTER

TO:

TO:	Registration Sec Division of Corp			, , , ,	
A11+-11	a com	Bolin	Management LLC	• • • •	
SUBJI	:C1:	Name of Lim	ited Liability Company		
The en	closed Articles of z	Amendment and fee(s) are sub	mitted for filing.		
Please	return all correspoi	ndence concerning this matter	to the following:		
			Zhang, Zhanrui		
			Name of Person		
			Firm/Company		202
600 N Atlantic Avenue				<i>.</i> .) DEC
Address					_
	Daytona Beach, FL 32118				
	City/State and Zip Code				
			eataxservicesfl@gmail.com to be used for future annual report noti	tication)	., 50
For fur	ther information co	oncerning this matter, please c		neution)	
Zhang	, Zhanrui		949 836-4037		
	Name of	Person		e Telephone Number	-
Enclos	ed is a check for th	e following amount:			
□ \$2	5.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	■ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing F Certificate of S Certified Copy (additional copy is	Status &
	Mailing Address Registration S Division of C P.O. Box 632 Tallahassee, I	Section orporations 7	Street Address: Registration Se Division of Coo The Centre of 7 2415 N. Monro Tallahassee, FI	porations fallahassee e Street, Suite 810	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	Bolin Management LLC		
(Name of the Limi	ted Liability Company as it now appears (A Florida Limited Liability Company)	on our records.)	
The Articles of Organization for this Limited L Florida document number L22000244465	iability Company were filed on	05/26/2022	and assigned
This amendment is submitted to amend the following	lowing:		
A. If amending name, enter the new name of	of the limited liability company her	<u>re</u> :	
The new name must be distinguishable and contain the	words "Limited Liability Company," the de	signation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if appli		10 F3	
(Principal office address MUST BE A STREE	ET ADDRESS)		<u> </u>
			
Enter new mailing address, if applicable:			20 20
(Mailing address MAY BE A POST OFFICE	<u>BOX)</u>		
B. If amending the registered agent and/or agent and/or the new registered office addre		cords, enter the na	nme of the new registered
Name of New Registered Agent:	Zhang, Zhanrui		
New Registered Office Address:	600 N Atlantic Avenue		
	Enter Flori	da street address	
	Daytona Beach	, Florida	32118
	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 = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	Li, Bolin	600 N Atlantic Avenue	
		Daytona Beach, FL 32118	□Remove
			Change
AMBR	Zhang, Zhanrui	600 N Atlantic Avenue	
		Daytona Beach, FL 32118	□Remove
			□Change
			Disc Add
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			□ Change
		 	
			Change
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n effective dat (te: 1f the da	if other than the date of is listed, the date must be specified inserted in this block does active date on the Departmen	fic and cannot be price not meet the application.	icable statutory	or more than 90 of filing requirem	_ (optional) days after filing ents, this date	.) Pursuar	nt to 605.0 be listed
ecord specific is filed.	es a delayed effective date, bu	it not an effective	time, at 12:01 a	a.m. on the earli	erof:(b) Th	ie 90th d	ay after t
	December 8th	2022	—· 	7/4			
ted	对报	85	The state of the s	A/CA_	-		

Filing Fee: \$25.00