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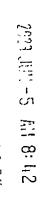
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| Special Instructions to Filing Officer: |
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| ection porations | | |
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| USA LLC | | |
| Name of Lin | nited Liability Company | |
| Amendment and fee(s) are sub | omitted for filing. | |
| ondence concerning this matter | to the following: | |
| SA ZHOU | | |
| | Name of Person | |
| | Firm/Company | |
| 606 N RIO GRANDE AV | Е | |
| | Address | |
| ORLANDO, FL 32805 | | -) |
| ZHOUYIFAN@GMAIL.C | City/State and Zip Code | |
| - | | fication) |
| oncerning this matter, please c | all: | |
| | 407 360-0798 | 2 |
| f Person | Area Code Daytim | e Telephone Number |
| ne following amount: | | |
| □ \$30.00 Filing Fee & Certificate of Status | S55.00 Filing Fee & Certified Copy (additional copy is enclosed) | ☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) |
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| orporations | Division of Cor | porations |
| | The Centre of T | |
| | DISA LLC Name of Lin Name of Lin Amendment and fee(s) are substance concerning this matter SA ZHOU ORLANDO, FL 32805 ZHOUYIFAN@GMAIL.C E-mail address: (concerning this matter, please concerning this matter, please concerning this matter of Status Section | Amendment and fee(s) are submitted for filing. Amendment and fee(s) are submitted for filing. Indence concerning this matter to the following: SA ZHOU Name of Person Firm/Company 606 N RIO GRANDE AVE Address ORLANDO. FL 32805 City/State and Zip Code ZHOUYIFAN@GMAIL.COM E-mail address: (to be used for future annual report not oncerning this matter, please call: Area Code Daytim one following amount: S30.00 Filing Fee & Certified Copy (additional copy is enclosed) SEE Section Origonations Origonations Origonations Division of Cortified Copt (additional copy is enclosed) STreet Address: Registration Section Origonations Origination of Cortified Copt (additional copy is enclosed) STreet Address: Registration Section Origination of Cortified Copt (additional copy is enclosed) |

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| AN | TONG | USA | LLC |
|----|------|-----|-----|
| | | | |

| (<u>Name of the Lim</u> | ited Liability Comp: (A Florida Limited | any as it now appears on our re Liability Company) | ecords.) |
|--|---|---|--|
| The Articles of Organization for this Limited I Florida document number L22000304522 | Liability Company | were filed on <u>07/07/2022</u> | and assigned |
| This amendment is submitted to amend the fol | lowing: | | |
| A. If amending name, enter the new name of | of the limited liab | oility company here: | |
| N/A | | | |
| The new name must be distinguishable and contain the | words "Limited Liabi | ility Company," the designation ' | "LLC" or the abbreviation "L.L.C." |
| Enter new principal offices address, if applicable: | | 606 N RIO GRANDE AV | <u>'E</u> |
| (Principal office address MUST BE A STREA | | ORLANDO, FL 32805 | |
| | | | |
| | | | ∵ |
| Enter new mailing address, if applicable: | | 606 N RIO GRANDE AV | E 27 |
| (Mailing address MAY BE A POST OFFICE BOX) | | ORLANDO, FL 32805 | - 2 cp |
| | | | |
| B. If amending the registered agent and/or agent and/or the new registered office address Name of New Registered Agent: | | address on our records, <u>er</u> | nter the name of the new registere |
| New Registered Office Address: | 606 N RIO GR | ANDE AVE | |
| | | Enter Florida street aa | ddress |
| | ORLANDO | | , Florida <u>32805</u> |
| | | City | Zip Code |
| New Registered Agent's Signature, if changing | Registered Agent: | | |
| I hereby accept the appointment as registery provisions of all statutes relative to the propaccept the obligations of my position as reg being filed to merely reflect a change in the company has been notified in writing of this | per and complete istered agent as p registered office | performance of my duties provided for in Chapter 6 | s, and I am familiar with and 05, F.S. Or, if this document is |
| | If Cha | Zhov- nging Registered Agent, Signate | Soc. ure 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 |
|---------------|-------------|----------------------|----------------|
| MGR | FEN YANG | 11205 HISTORY AVE | □Add |
| | | ORLANDO, FL 32832 | Remove |
| | | | |
| AMBR | SA ZHOU | 606 N RIO GRANDE AVE | = Add |
| | | ORLANDO, FL 32805 | □Remove |
| | | | □ Change |
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