L22000393566

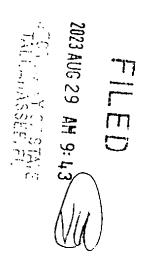
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COVER LETTER

	ision of Cor				
STREET, "C+	HARVARD EXTENSION UNDERGRADUATE PROGRAM LLC Name of Limited Liability Company				
MODJEX. I					
The enclosed	l Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return	all correspo	ondence concerning this matter	to the following:		
		HONG LIU			
			Name of Person		
		HARVARD EXTENSION	UNDERGRADUATE PROGRA	AM LLC	
	Firm Company				
	3808 UNION ST STE 10C				
			Address		
FLUSHING NY 11354					
		•••	City/State and Zip Code	,	
		DTTAXINFO@GMAIL.CO	OM to be used for future annual report no		
Cor further in	nformation c	oncerning this matter, please e	·	mircation;	
JASON ZHO	ЭÜ		929 5009164 at ()		
	Name o	f Person	Area Code Dayti	me Telephone Number	
Enclosed is a	check for th	ne following amount:			
■ \$25.00 F	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 tadditional copy is enclosed)	
<u>Mailing Address:</u> Registration Section		Street Address: Registration Section			
Division of Corporations		Division of Corporations			
P.O. Box 6327 Tallahassee, FL 32314			The Centre of Tallahassee 2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

HARVARD EXTENSION UNDERGRADUATE PROGRAM 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 Compa	ny were filed on 09/08/2022	and assigned	
Florida document number <u>L22000393566</u> .	,		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited li	ability company here:		
ROCK ORIENT LLC			
The new name must be distinguishable and contain the words "Limited Li	ability 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)		20	
		7023 AUG	
		·= ~ ,	
Enter new mailing address, if applicable:	3808 UNION ST STE 10C	> <u>9</u>	
(Mailing address MAY BE A POST OFFICE BOX)	FLUSHING NY 11354		
		755 9 7 13 13	
B. If amending the registered agent and/or registered offic agent and/or the new registered office address here: Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street address		
	Florida		
	City	Zip Code	
New Registered Agent's Signature, if changing Registered Age			
I hereby accept the appointment as registered agent and a provisions of all statutes relative to the proper and comple accept the obligations of my position as registered agent a being filed to merely reflect a change in the registered officompany has been notified in writing of this change.	ete performance of my duties, and is provided for in Chapter 605, F	l I am familiar with and 'S. Or, if this document is	
uc.	hanging Registered Agent Signature of	Non-Donistand Asses	

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>	Name	Address	Type of Action
			□Add
			□Remove
			□Change
			□Add
			□Remove
			Change
			□Add
		·	□Remove
			□Change
			□Add
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Note: If the dat	if other than the dar is listed, the date must be e inserted in this block active date on the Depar	does not meet the	applicable stat	filing or more than utory filing requi	(option; 190 days after fill irements, this da	al) ing.) Pursuant to 605 ate will not be liste	.0207 (3)(b) ed as the
f the record specifie ecord is filed.	s a delayed effective da	ite, but not an effec	ctive time, at 1	2:01 a.m. on the	earlier of: (b)	The 90th day after	r the
Dated	· · · · · · · · · · · · · · · · · · ·	. 2023	·				
		Mora liv	4				
	Sig	nature of a member c	or authorized rep	resentative of a mo	ember		
HON	RG LIU		or printed name				

Filing Fee: \$25.00