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(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
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COVER LETTER

TO:	Registration So Division of Cor		ĸ	<i>3</i>	,·
		· . • G.I	1.S Property LLC		
SUBJI	ECT:	Name of Lim	nited Liability Company		
		Amendment and fee(s) are sub	-		
Please	return all correspo	ndence concerning this matter	to the following:		
			Wei Huo		
			Name of Person		
			G.H.S Property LLC		ne Number S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Firm/Company					
			Address	•	
			Oviedo, FL 32765		
			City/State and Zip Code		
			huowei0223@gmail.com		
		E-mail address: (to be used for future annual repo	ort notification)	
For fur	ther information c	oncerning this matter, please c	all:		
	Wei	Huo	at ()	1-8878	
	Name o	f Person	Area Code I	Daytime Telephone N	umber
Enclos	ed is a check for th	ne following amount:			
□ \$2	5.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	■ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed	Cer d) Cer	rtificate of Status & rtified Copy
	Mailing Addres Registration S		Street Addr. Registratio		
	Division of C	orporations	-	f Corporations	
	P.O. Box 632			e of Tallahassee	'4- 010
	Tallahassee, I	*L 32314	2415 N. M	Ionroe Street, Su	nte 810

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

G.H.S Pro			
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appear Liability Company)	rs on our records.)	
The Articles of Organization for this Limited Liability Company Florida document number	were filed on	November 21, 2022	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ility company he	ere:	
Old Ash Property LLC			
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the d	lesignation "LLC" or the abb	reviation "L.L.C."
Enter new principal offices address, if applicable:	16268 Old Ash	Loop, Orlando, FL 32828	2022 DE SEG (4)
Principal office address MUST BE A STREET ADDRESS)			<u> </u>
			7 P M
Enter new mailing address, if applicable:	3124 Buffingto	n PL., Oviedo, FL 32765	
Mailing address MAY BE A POST OFFICE BOX)			<u></u>
3. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our r	records, enter the name	of the new register
Name of New Registered Agent:	 -	<u></u>	
New Registered Office Address:	Enter Flo	orida street address	
		, Florida	
	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>	<u>Address</u>	Type of Action
			□Add
			□Change
			□Remove
			□Change
			□Remove
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Note: If the	nte, if other than the date of date is listed, the date must be speci date inserted in this block does effective date on the Departmer	not meet the appli	cable statutory fili:	(optionore than 90 days after ng requirements, this	iling.) Pursuant to 605.0207
he record spec ord is filed.	cifies a delayed effective date, b	at not an effective	time, at 12:01 a.m.	on the carlier of: (b)	The 90th day after the
Dated	December 6th	2022	·		
		WEI	HIIO		
		WCL	· //wv		
	Signature	e of a member or aut		e of a member	

Filing Fee: \$25.00