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06/17/24--01010--001 **25.00



COVER LETTER

	Registration of	n Section Corporations				
(*************************************		Lehigh Acres LLC				
SUBJEC	J1:	Name of	Limited Liability Company			
The encl	losed Article	s of Amendment and fee(s) are	submitted for filing.			
Please re	eturn all corr	espondence concerning this mat	ter to the following:			
		ZHENG YUAN ZHEN	G			
			Name of Person			
		Garden Lehigh Acres, I	LLC			
			Firm/Company			
		10293 Carolina Willow	Drive			
	Address					
		Fort Myers, FL 33913				
			City/State and Zip Code			
		E-mail addre	ss: (to be used for future annual report r	notification)		
For furth	ner informati	on concerning this matter, pleas	se call:			
Susan M	1. Larned, Es	sq.	239 202-2881 at ()			
	Na	me of Person	Area Code Day	time Telephone Number		
Enclosed	d is a check t	for the following amount:				
≡ \$25.	,00 Filing Fc	ee S30.00 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 Ad	Idress: on Section	<u>Street Address:</u> Registration :			
	Division of	of Corporations	Division of C	Division of Corporations		
	P.O. Box	6327 ee, FL 32314		f Tallahassee nroe Street, Suite 810		

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Garden Lehigh Acres LLC		
(<u>Name of the Limited Liability Compa</u> (A Florida Limited	iny as it now appears on our re Liability Company)	ecords.)
he Articles of Organization for this Limited Liability Company	were filed on 12/05/2022	and assigned
lorida document number L22000510201		
his amendment is submitted to amend the following:		
. If amending name, enter the new name of the limited liab	oility company here:	
he new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation	"LLC" or the abbreviation "L.L.C."
nter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS)		75 2
		DZ4 JUN 19
nter new mailing address, if applicable:		-5
Mailing address MAY BE A POST OFFICE BOX)		- F
		<u>;</u> ≓ 16
3. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>e</u>	nter the name of the new registo
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street a	ddress
		171i.d.a
	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.

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	BAD YUE ZHENG	10293 Carolina Willow Drive	□Add
		Fort Myers, FL 33913	
			□Change
			□Add
			□ Remove
			Change
			□Add
			□Remove
			□Change
			□Add
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			☐ Change

			
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Effective date, if other tha	n the date of filing:		(optional)
Note: If the date inserted in	ite must be specific and cannot be pr this block does not meet the app the Department of State's recor	licable statutory filing require	0 days after filing.) Pursuant to 605.0207 ments, this date will not be listed as
	fective date, but not an effective	e time, at 12:01 a.m. on the ea	rlier of: (b) The 90th day after the
rd is filed.			
rd is filed. Dated May 28	2024		

Typed or printed name of signee