

L22 000523807

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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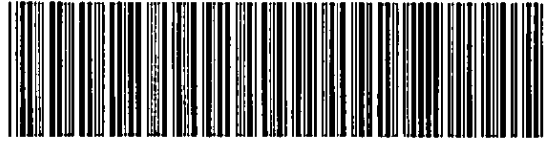
(Business Entity Name)

(Document Number)

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12-29-2022 11:11 AM

STATE OF FLORIDA
TALLAHASSEE, FLORIDA

2022 DEC 29 PM 3:00

RECEIVED

28

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Rosedew LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Kathy Cai

Name of Person

Rosedew LLC

Firm/Company

7862 W Irlo Bronson Memorial Hwy #1246

Address

Kissimmee, FL 34747

City/State and Zip Code

DisneyVacations4U@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Kathy Cai

at (781) 363-0547

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 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
(additional copy is enclosed)

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

2022 DEC 29 PM 3:00
STATE OF FLORIDA
TALLAHASSEE, FLORIDA

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Rosedew 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 Company were filed on 12/14/22 and assigned Florida document number L22000523807.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability 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)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

Andrew Xu

New Registered Office Address:

7862 W Irlo Bronson Memorial Hwy #1246

Enter Florida street address

Kissimmee

Florida 34747

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>	<u>Type of Action</u>
AMBR	Kathy Cai	7862 W Irlo Bronson Memorial Hwy #1246	<input checked="" type="checkbox"/> Add
		Kissimmee, FL 34747	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Andrew Xu	7862 W Irlo Bronson Memorial Hwy #1246	<input checked="" type="checkbox"/> Add
		Kissimmee, FL 34747	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Lina He	7862 W Irlo Bronson Memorial Hwy #1246	<input checked="" type="checkbox"/> Add
		Kissimmee, FL 34747	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Lina He	7862 W Irlo Bronson Memorial Hwy #1246	<input checked="" type="checkbox"/> Add
		Kissimmee, FL 34747	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

2022 FEB 29 PM 3:00
ALL INFORMATION CONTAINED HEREIN IS UNCLASSIFIED
DATE 08-11-2010 BY 60322 UCBA

2022 DEC 09 PM 3:00
ST. PAUL'S CATHEDRAL
TALLAHASSEE, FLORIDA

2012 DEC 19 PM 3:00
STAFF, STATION
TALLAHASSEE, FLORIDA

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated 12/17/2022 12:01 p.m.

Kathryn Coni
Signature of a member or authorized representative of a member

Kathy Cai

Typed or printed name of signee

Filing Fee: \$25.00