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COVER LETTER

TO: Registration So Division of Cor			
SUBJECT:	Aqua	Spa FL LLC nited Liability Company	
	Alume of Lin	nicd Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	·	Veny zhang Yan Name of Person	
		Aqua Spa FL Li	1-C
		Clarke Rd	
		City/State and Zip Code May 1970 @ icloud To be used for future annual report positions.	
	Cindy i	ma 1970 @ icloud to be used for future annual report notif	· Cem
For further information c	concerning this matter, please c	all.	
Jong Zhan	J Jan Ferson	at (<u>UCT</u>) <u>988</u> Area Code Daytimo	4226 Telephone Number
Enclosed is a check for t	he 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 Addres	<u>is:</u>	Street Address:	

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

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

ARTICLES OF AMENDMENT FILED ARTICLES OF ORGANIZATION 29 PH 5: 05

Aqua	Spa	FL ILC	5, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,	right of
(Name of the Limited (A	Liabiliev Compan Florida Limited Li	y <mark>as it now appears</mark> ability Company)	s on our records.)	
The Articles of Organization for this Limited Liab Florida document number	<u>b</u> .	vere filed on	3/30/2023	and assigned
This amendment is submitted to amend the following	ing:			
A. If amending name, enter the new name of th	<u>ie limited liabil</u>	ity company he	<u>re</u> :	
NA The new name must be distinguishable and contain the word				
The new name must be distinguishable and contain the word	ls "Limited Liabilit			
Enter new principal offices address, if applicable	le:	No Cha	ng 2	
(Principal office address MUST BE A STREET A	<u> 4DDRESS)</u>		<u> </u>	
Enter new mailing address, if applicable:	ov.	1131 5	Clarke Rd	
(Mailing address MAY BE A POST OFFICE BO	<u>/A)</u>		· / · · · · · · · · · · · · · · · · · ·	
B. If amending the registered agent and/or registered agent and/or the new registered office address by Name of New Registered Agent: New Registered Office Address:	<u>iere</u> :		ecords, <u>enter the nan</u> A M	ne of the new registere
	0(1)	City	Florida	34761 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
i <u>mar</u>	Xie. Changshun	ge42 Heritage Bay Cir Orlando, Fl 32836	□ Add
		Orlando, fl 32836	Remove
			□Change
MGR	Yongzhang Yan	1131 S Clarke Rd' Occee, FL 34761	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
	·	Occee, FL 34761	□Remove
			□Change
	***************************************		🗆 Add
		- 	□Remove
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			🗆 Add
			□Remove
			□Change

	N /Y
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(If an effect Note: If	date, if other than the date of filing:
he record s ord is filed	pecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated _	10/24 <u>2024</u>
	4117
	Signature of a member or authorized representative of a member
	Jong zhang Jan. Typed or printed native of signee