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COVER LETTER

Registration Section

TO:

Div	ision of Cor	porations				
aug mar	WAN LI LLC					
SUBJECT:		Name of Lim	ited Liability Company			
The enclosed	l Articles of	Amendment and fee(s) are sub	omitted for filing.			
riease return	an correspo	endence concerning this matter	to the following:			
		HAO LYU				
			Name of Person			
		WAN LI LLC				
			Firm/Company			
		3 MARIGOLD CT				
			Address	 		
		WARREN, NJ 07059				
			City/State and Zip Code	·		
		HAOLYU92@GMAIL.CO				
		E-mail address: (to be used for future annual report no	tification)		
For further in	nformation c	oncerning this matter, please c	all:			
HAOLYU			646 2388652 at ()			
	Name o	f Person	at () Area Code Daytii	ne Telephone Number		
Enclosed is a	check for th	ne following amount:				
■ \$25.00 F		□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
Reg	iling Addres gistration S	Section	Street Address: Registration Se	ection		
	ision of C Box 632	orporations	Division of Co The Centre of			
	lahassee, I			rattanassee oe Street, Suite 810		

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

WAN LI LLC			
(<u>Name of the Limited Liability Co</u> (A Florida Lim	ompany as it now appears on our recordited Liability Company)	d <u>v.</u>)	
e Articles of Organization for this Limited Liability Comp	pany were filed on 2/19/2024	and a	ssigned
orida document number 1.24000086872			
is amendment is submitted to amend the following:			
If amending name, enter the new name of the limited	liability company here:		
new name must be distinguishable and contain the words "Limited I	.iability Company," the designation "LLC	O" or the abbreviation	L.L.C."
iter new principal offices address, if applicable:			
rincipal office address MUST BE A STREET ADDRESS	<u> </u>		
		202 4 FEB	
			•••,
ter new mailing address, if applicable:			
ter new mailing address, if applicable: <u>Jailing address MAY BE A POST OFFICE BOX</u>		75° . 6 0	į
,			
If amending the registered agent and/or registered off ent and/or the new registered office address here:	ice address on our records, <u>enter</u>		ew registe
Name of New Registered Agent:	······		
New Registered Office Address:			
	Enter Florida street addre.	55	
		lorida	
	City	Zip Cod	e

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 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	HAO LYU	3 MARIGOLD CT	
		WARREN, NJ 07059	□Remove
			□Change
AMBR	JIANGHUI LIN	3 MARIGOLD CT	■Add
		WARREN, NJ 07059	□Remove
			□Change
			□Add
			□Remove
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f an effective date is Note: If the date	other than the date of filing: listed, the date must be specific and can nserted in this block does not meet we date on the Department of State	not be prior to date of filin the applicable statutor;	g or more than 90 days after fil y filing requirements, this d	ing.) Pursuant to 605.020
ir utioui		0.7 00:4 0.		
e record specifies rd is filed.	delayed effective date, but not an e	effective time, at 12:01	a.m. on the earlier of: (b)	The 90th day after the
Dated	<u>2</u>	024		
	7/	Y		

Filing Fee: \$25.00