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COVER LETTER

Tallahassee, FL 32314

TO: Registration Se Division of Cor			
	TURE, LLC.		
SUBJECT:	Name of Lim	nited 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:	
	TIEN HO		
	•	Name of Person	
	LHL VENTURE, LLC.		
	· · · · · · · · · · · · · · · · ·	Firm/Company	
	12737 TANNENCREST I	DR.	1.
		Address	
	RIVERVIEW, FL. 33579		
		City/State and Zip Code	
	NTTGROUPLLC@GMAIL		
For further information c	oncerning this matter, please c	to be used for future annual report notification)	
TIEN HO		727 459-8599 at ()	
Name o	f Person	Area Code Daytime Teleph	one Number
Enclosed is a check for the	ne following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addres Registration S		Street Address:	
Division of C		Registration Section Division of Corporation	ons
P.O. Box 632	-	The Centre of Tallahas	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Linklife)	<u></u>	
(A Florida L	Company as it now appears on our recordinated Liability Company)	<u>5.</u>)
The Articles of Organization for this Limited Liability Cor Florida document number 1.24000177082	mpany were filed on APRIL 19, 2024	and assigned
his amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limite	ed liability company here:	
he new name must be distinguishable and contain the words "Limite	d Liability Company," the designation "LLC"	" or the abbreviation "L.L.C."
nter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRE	<u> </u>	
		; <u> </u>
		:
nter new mailing address, if applicable:		f
Aailing address MAY BE A POST OFFICE BOX)		,
		: : :
. If amending the registered agent and/or registered of gent and/or the new registered office address here:	office address on our records, <u>enter</u>	• •
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	· · · · · · · · · · · · · · · · · · ·
	, Flo	orida Zip Code

New Registered Agent's Signature, if changing Registered Agent:

THE VENTURE LLC

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>	Name	Address	Type of Action
MGR	LE, THO MINH GHANG	6225 WINTHROPE DRIVE	□Add
		SUFFOLK, VA. 23435	≣Remove
			□Change
MGR	LE. THO MINH GIANG	6225 WINTHROPE DRIVE	= Add
		SUFFOLK, VA. 23435	Remove
			□Change
			□Add
			□Remove
			Change
			Remove
			\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
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fective date, if other an effective date is listented other. If the date insert ocument's effective	ed, the date must be serted in this block of	specific and ca does not mee	nnot be prior to t the applica	o date of filing o	or more than 90		filing.) Pur	
	layed effective da	te, but not an	effective tir	ne, at 12:01 a.	m. on the car	lier of: (b)	The 90	th day after the
record specifies a de is filed. APRIL 28		Muc	2024					

Filing Fee: \$25.00