

L24 000 235 280

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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WAIT

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MAIL

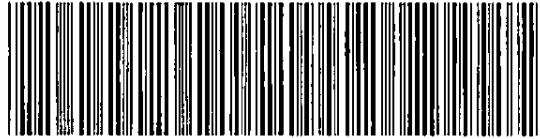
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2024 JUL 25 PM 11:50
TALLAHASSEE, FLORIDA

2024 JUL 25 PM 1:19
TALLAHASSEE, FLORIDA

Sunshine State Corporate Compliance Company

3458 Lakeshore Drive, Tallahassee, Florida 32312

(850) 656-4724

DATE 7/25/2024

****WALK IN****

ENTITY NAME DEVELOP DOMINICA, LLC

DOCUMENT NUMBER _____

****PLEASE FILE THE ATTACHED AND RETURN****

XXXXXXXXXX

Plain Copy

Certified Copy

Certificate of Status

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RECEIVED
TALLAHASSEE
FLA

****PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY****

Certified Copy of Arts & Amendments

Certificate of Good Standing

****APOSTILLE / NOTARIAL CERTIFICATION****

COUNTRY OF DESTINATION _____

NUMBER OF CERTIFICATES REQUESTED _____

TOTAL OWED \$25

ACCOUNT #: I20160000072

E. R. FLO

Please call Tina at the above number for any issues or concerns. Thank you so much!

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

DEVELOP DOMINICA, 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 MAY 30, 2024 and assigned
Florida document number L24000235280

This amendment is submitted to amend the following:

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

DEVELOP VIETNAM, LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC"

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:

New Registered Office Address:

Enter Florida street address

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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	NIJAH HILAIRE	8 RIVER STATION-ROSEAU,	<input type="checkbox"/> Add
		COMMONWEATH OF DEMINICA UN	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	THUYTIEN KATHERINE CHEU	44325 LORD FAIRFAX PL.	<input checked="" type="checkbox"/> Add
		ASHBURN, VA 20147	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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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 JULY 25 2024

Signature of a member or

Signature of a member or authorized representative of a member

COREY E. HOFFMAN

Typed or printed name of signee

Filing Fee: \$25.00