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8/10/24 laure of name o Real Estate Company must be in Realtor name.

> I read it Said send reason for change change thotplease discard this Note. Thankyon

COVER LETTER

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TO: Registration S Division of Co			
SUBJECT:	Name of Lin	JA LEHUA, L	<u>LC</u>
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	Diar	na Robert	S
	DIA	NA LEHUA Firm/Company	11
	132 L	-AKE SHORE	E DRIVE PHIT
	NORTH	frituit Ctate and Zim Codo	1CH, FL 3340
	diana'	voberts 89 to be used for future annual report noti	@yahoo.com
For further information of	concerning this matter, please c	all:	
Diana	Roberto Roberto	at (<u>561)</u> <u>510</u> Area Code Daytim	D - 3425 e 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 Address: Registration Section Division of Corporations P.O. Box 6327

Street Address: Registration Section Division of Corporations The Centre of Tallahassee

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

DIANA	LEHUA	LLC
(Name of the Limited Liability Compa (A Florida Limited L	ny as it now appears on our re- liability Company)	Fords.)
The Articles of Organization for this Limited Liability Company Florida document number <u>L Z 4 000 Z 63</u>	were filed on $Juni$	e 10, 2024 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabil the new name must be distinguishable and contain the words "Limited Liabil"	BERTS	LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		. 3− –
(Principal office address MUST BE A STREET ADDRESS)	,	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		5
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	ddress on our records, <u>en</u>	ter the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street ad	dress
		, Florida
	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>	Address	Type of Action
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			□Remove
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Filing Fee: \$25.00

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		Signature of a member	or authorized each	contative of	aber	

Filing Fee: \$25.00