

L25000110176

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

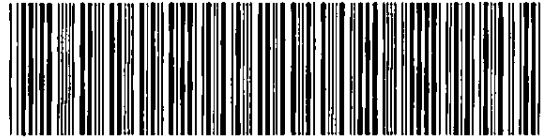
(Business Entity Name)

(Document Number)

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04/17/25--01021--017 **55.00

FILED
2025 APR 17 AM 11:42
CLERK OF DISTRICT COURT
TALLAHASSEE, FL

4/17/2025

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: GAOGAO LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Van Ngoc Cam Pham

Name of Person

4200 S TAMiami TRL

Firm/Company

Address

PORT CHARLOTTE, FL 33952

City/State and Zip Code

Bachnguyenho@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Bach Ho

714

414-3189

at (_____) _____

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the 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
Tallahassee, FL 32314

Street Address:

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

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

FILED

2025 APR 17 AM 11:42

GAOGAO LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

STATE OF FLORIDA
TALLAHASSEE, FL

The Articles of Organization for this Limited Liability Company were filed on 03/14/2025 and assigned
Florida document number L25000110176.

This amendment is submitted to amend the following:

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

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

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

4200 TAMiami TrL, UNIT K
PORT CHARLOTTE, FL 33952

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

4200 TAMiami TrL, UNIT K
PORT CHARLOTTE, FL 33952

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:

Bach Nguyen Ho

New Registered Office Address:

4200 TAMiami TrL, UNIT K

Enter Florida street address

PORT CHARLOTTE

Florida 33952

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.

Bach Nguyen Ho

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>	<u>Address</u>	<u>Type of Action</u>
AMBR	Bach Nguyen Ho	4200 TAMiami TrL, UNIT K	<input checked="" type="checkbox"/> Add
		PORT CHARLOTTE, FL 33952	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Van Ngoc Cam Pham	4200 TAMiami TrL, UNIT K	<input type="checkbox"/> Add
		PORT CHARLOTTE, FL 33952	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Change

[illegible]

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Van Pham
Signature of a member or authorized representative of a member

Typed or printed name of signee

Filing Fee: \$25.00