

L22000282433

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

(Business Entity Name)

(Document Number)

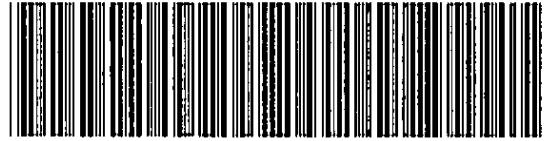
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JAN 31 2023



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11/15/22--01030--025 \*\*5.00

FILED  
2022 NOV 15 PM 2:56  
TAMPA, FLORIDA

# COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** MC green relaxation 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:

Irene Cai

Name of Person

Yongmei CAI & Associates CPA. PA

Firm/Company

601 N Congress Ave, Suite 412

Address

Delray Beach, FL 33445

City/State and Zip Code

youngmeicpa@gmail.com

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

For further information concerning this matter, please call:

Irene Cai at ( 561 ) 699-7886  
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**

MC green relaxation 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 06/21/2022 and assigned Florida document number L22000282433.

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:

1500 Apalachee Pkwy

**(Principal office address MUST BE A STREET ADDRESS)**

Unit 1165

Tallahassee, FL 32301

Enter new mailing address, if applicable:

1500 Apalachee Pkwy

**(Mailing address MAY BE A POST OFFICE BOX)**

Unit 1165

Tallahassee, FL 32301

**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:

Hong Xia Zhang

New Registered Office Address:

1500 Apalachee Pkwy, Unit 1165

*Enter Florida street address*

Tallahassee

*City*

Florida

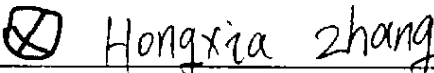
32301

*Zip Code*

FILED  
JUN 21 2022  
TALLAHASSEE, FL  
CLERK OF CIRCUIT COURT  
1500 APALACHEE PKWY  
UNIT 1165  
TALLAHASSEE, FL 32301

**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>	<u>Address</u>	<u>Type of Action</u>
MGR	Hong Xia Zhang	1500 APALACHEE PKWY, UNIT 1320	<input type="checkbox"/> Add
		TALLAHASSEE, FL 32301	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Hong Xia Zhang	1500 Apalachee Pkwy	<input checked="" type="checkbox"/> Add
		Unit 1165	<input type="checkbox"/> Remove
		Tallahassee, Fl 32301	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

**D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)**

Please Change all address on this article to :

1500 Apalachee Pkwy, unit 1165, Tallahassee, Fl 32301

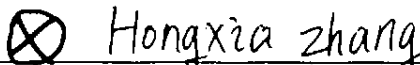
**E. Effective date, if other than the date of filing: 11/8/2022 (optional)**

(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)

**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.

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.

Dated November 8, 2022



Signature of a member or authorized representative of a member

Hongxia Zhang

Typed or printed name of signee