

108 0000 54232

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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S. PRATHER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SONNA ENTERPRISE LLC
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

SON NGOC PHAM
Name of Person

SONNA ENTERPRISE LLC
Firm/Company

517 E. 6th AVE
Address

WINDERMER, FL 34786
City/State and Zip Code

SNPHAM1@GMAIL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

SON NGOC PHAM at (407) 625-9930
Name of Person Area Code & Daytime Telephone Number

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

Enclosed is a check for the following amount:

☐ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 12, 2022

SONNA ENTERPRISE LLC
517 E 6TH AVE
WINDEREMERE, FL 34786

SUBJECT: SONNA ENTERPRISE LLC
Ref. Number: L08000054232

We have received your document for SONNA ENTERPRISE LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a FLORIDA LIMITED PARTNERSHIP, but your entity is a FLORIDA LLC. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6939.

Stacy Prather
Regulatory Specialist III

Letter Number: 522A00022778

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR
LIMITED LIABILITY COMPANY**

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Name of the limited liability company: SONNA ENTERPRISE LLC

2. (a) _____ (b) _____
Principal office address of limited liability company: Mailing address of limited liability company:
(Note: MUST BE STREET ADDRESS) (Note: MAY BE POST OFFICE BOX)

517 E 6th AVE
WINDERMERE, FL 34786

517 E 6th AVE
WINDERMERE, FL 34786

06/02/2008
3. Date of filing/registration in Florida

L08000054232
4. Document number

5. (a) UNITED STATES CORPORATION
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

AGENT, INC.
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
5575 S. SEMORAN BLVD, #36
ORLANDO, FL 32822

(b) SON PHAM
Enter name of NEW Registered Agent and/or NEW Registered Office address:

NEW Registered Office Address:
517 E. 6th AVE
WINDERMERE, FL 34786

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

son pham
Signature of a member or authorized representative of a member

SON PHAM
Printed or typed name of signee

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.

son pham
Signature of Registered Agent