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COVER LETTER

TO: Registration Se Division of Cor			
SUBJECT:	let-Nomz, LLC	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	Chri	Name of Person	
	758	Viet-Nonz Firm/Company	
	7581 Un	iversity Blud.	
	D Winter	Park FL 32 City/State and Zip Code	1792
		Omail - com to be used for future annual report notifi	
For further information c	oncerning this matter, please ca	all:	
Chris (hen f Person	at (407) 619 Area Code Daytime	DSID Telephone Number
Enclosed is a check for the	ne 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/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	mz, 40	_			
(Name of the Limited	Liability Company Florida Limited Liab	as it now app pility Company	ears on our re y)	cords.)	
The Articles of Organization for this Limited Liab Florida document numberLISOOOO6		ere filed on	April	15, 20	and assigned
This amendment is submitted to amend the follow	ving:				
A. If amending name, enter the new name of t	<u>he limited liabilit</u>	y company	<u>here</u> :		
The new name must be distinguishable and contain the wor	•		-		4
Enter new principal offices address, if applicat	ole:	7581	Univer	sity B	1vd 32792
(Principal office address MUST BE A STREET	ADDRESS)	Winte	er Parle	c, FL	3 2792
	-	<u> </u>	<u>-</u>		<u> </u>
Enter new mailing address, if applicable:	-	758	1 Union	ersity	Blud 32792
(Mailing address MAY BE A POST OFFICE Bo	<u>OX)</u>	Wint	er lar	k, FL	32792
B. If amending the registered agent and/or registered agent and/or the new registered office Name of New Registered Agent:	_			- <u></u>	the name of the new
	147-	7 1/.	C. n.m	Pl	
New Registered Office Address:	17//	Enter l	Florida street ac	idress	
	Winter	Park		. Florida	32792
	· · · · · · · · · · · · · · · · · · ·	City		<u> </u>	Zip Code
New Registered Agent's Signature, if changing Re	gistered Agent:				
I hereby accept the appointment as registered provisions of all statutes relative to the proper accept the obligations of my position as registabeing filed to merely reflect a change in the recompany has been notified in writing of this change in the company has been notified in writing of the change in the c	and complete pe ered agent as pro gistered office ac	erformance ovided for i	of my dutie: n Chapter 6	s, and I am 05, F.S. Or	familiar with and if this document is

Page 1 of 3

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:

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
AMBR	Michael Cho	1477 Via Sangro Pl Winter Parlc, FL 3279	⊠ Add
		Winter Parls, FL 3279	Z □ Remove
			Change
	Danie (Duny	Please remove	□ Add
			Remove
			Change
			Add
		,	Remove
			☐ Change
			Add
			☐ Remove
			
			Add g
		 	PRemove Space Control
			Change
			
			Remove
			Change

	 	
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	•	
n effective date is listed, th	than the date of filing: e date must be specific and cannot be prior to date of filing or m in this block does not meet the applicable statutory filin	(optional) nore than 90 days after filing.) Pursuant to 605.02 ng requirements, this date will not be listed:
	on the Department of State's records.	6 • 1 • • • • • • • • • • • • • • • • • • •
	delayed effective date, but not an effective t	time, at 12:01 a.m. on the earlier
record specifies a		
	the record is filed.	
he 90th day after	the record is filed.	
he 90th day after	the record is filed.	
The 90th day after		16 OCT -4 AM

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Filing Fee: \$25.00