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	Registrat Division				-	
478 788 88747	Sout		telligent Systems, LLC			
SUBJEC	.1:		Name of Lim	ited Liability Company		
			mendment and fee(s) are sub-			
			Chang Ik Choi			
				Name of Person		
			South East Intelligent Syste	ems, LLC		
				Firm/Company		
			115 Carlton Place			
			<u></u>	Address		
			Port Orange, FL, 32127			
			•	City/State and Zip Code		
			seis.cto@gmail.com			
			E-mail address; ()	to be used for future annual r	eport notificati	on)
For furth	er inform	vation cor	ncerning this matter, please co	iD:		
Tae Anth	ony Cho	oi			-5401	
	 	Name of I	Person	at () Area Code	Daytime Tel	ephone Number
Enclosed	is a chec	k for the	following amount:			
\$25.0	XO Filing 1	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)
			IG ADDRESS:		COURIER	ADDRESS:

Division of Corporations

P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

South East Intelligent Systems, LL	.C		
(Name of the Limi	ted Liability Compa (A Florida Limited)	iny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited L	iability Company	were filed on December 20, 2016	and assigned
Florida document number <u>L170001211253</u>	·		
This amendment is submitted to amend the following	lowing:		
A. If amending name, enter the new name of	of the limited liab	ility company here:	
The new name must be distinguishable and contain the v	words "Limited Liabi	lity Company." the designation "LI.C" or th	e abbreviation "L.L.C."
Enter new principal offices address, if applicable:		115 Carlton Place	
(Principal office address MUST BE A STREI	ET ADDRESS)	Port Orange, FL., 32127	
			18 S
Enter new mailing address, if applicable:		115 Carlton Place	# 955
(Mailing address MAY BE A POST OFFICE BOX)		Port Orange, FL, 32127	107.0 107.0
B. If amending the registered agent and registered agent and/or the new registered of			မှ ြို့ ter the name of the nev
Name of New Registered Agent:	Chang Ik Choi		
New Registered Office Address:	115 Carlton Pla	ace	
		Enter Florida street address	
	Port Orange	, 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.

Wanging 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>	Type of Action
MGR	Jose L. Orozco		
		430 Sherwood Avenue	Remove
		Satellite Beach, FL, 32937	Change
MGR	Tae Anthony Choi	393 Barrington Hall Drive	⊒ Add
	-	Macon, GA, 31220	Remove
			Change
			□ Remove
			Change
			Remove
		 	Chunge
			Remove
			Change
			Add
			Remove
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Signature of new ow	ner		
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Santina data if athor t	ann thu duta of filians	(optional)	
n effective date is listed, the te: If the date inserted	nan the date of filing: date must be specific and cannot be prior to date of filing or in this block does not meet the applicable statutory fil in the Department of State's records.	more than 90 days after filing.) Pursuant to 60)5.02 ted
record specifies a The 90th day after	lelayed effective date, but not an effective he record is filed.	e time, at 12:01 a.m. on the earl	ier
ted	·		
	Signature of a member or authorized representati	ive of a member	
	organization a memory or undividuous representati		

 $\textbf{.D:} \ \textbf{If amending any other information, enter change} (s) \ \textbf{here:} \ \textit{(Attach additional sheets, if necessary.)}$

Page 3 of 3

Filing Fee: \$25.00