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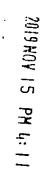
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## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: Sunmon Trading, LLC Name of mited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Habile Rahman
Summon Trading, LLC.  Firm/Company
P. O. Box 37123
Panama City, FL 32412 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Halule Rahman at (832) 312-9483  Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee Scritificate of Status Scri

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

Sunmoon Trace (Name of the Limited) (A	Ling, LL Liability Company of Florida Limited Liab	as it now appears of	on our records.)		_	
The Articles of Organization for this Limited Liabs. Florida document number <u>L1900022900</u> . This amendment is submitted to amend the following.  A. If amending name, enter the new name of the	<u>17</u> .		•	9and	2월19 NOV 15 PH 4	d
The new name must be distinguishable and contain the word Enter new principal offices address, if applicable (Principal office address MUST BE A STREET A	le:	Company," the des	gnation "LLC" or t	he abbreviation	<u>"L.</u> C."	<del></del>
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BO	- <u>)x)</u> _	Please	See Se	etion	D "	
B. If amending the registered agent and/or registered agent and/or the new registered office		e address on (	our records, <u>er</u>	iter the nai	me of t	the nev
Name of New Registered Agent:  New Registered Office Address:	611 West Panama	11th 5ty Enter Florid City	N/A  PCCL  a street address  , Florid	a 324	10   Tode	

## 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.

N/A

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>	Name	Address	Type of Action
MGR	Mahbubur Rahman		🗆 Add
		463 Maker Way Parama city, FL-32405	Remove
			Change
			Add
		<del></del>	Remove
			Change
		<del> </del>	🗆 Add
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			Remove
			Change
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			Change

_	New Mailing Address
_	0 4 5 00100
_	P.O. Box 37123 Panama City
	Panama City
	FL 32412
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1 e 11 e 1e:	ve date, if other than the date of filing: NOV, 11 2019 (optional) ective 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 605.020 If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a ent's effective date on the Department of State's records.
rec he	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier a 90th day after the record is filed.
ed _	Nov 11, 2019
	Signature of a member or authorized representative of a member
	4.11.21

Page 3 of 3

Filing Fee: \$25.00