## L19000229097

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## COVER LETTER

Division of Corporations	
SUBJECT: Sunmoon Trading, LLC	
SUBJECT: 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:	
Habile Rahman Name of Person	
Sunmoon Trading, LLC	
Firm/Company	
P. O. Box 37123	
Address	
Panama Pit. El 32412	
Panama City, FL 32412 City/State and Zip Code	
habib_ 93@yahoo.com	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Habile Rahman at (832) 3/2-9483  Name of Person  Area Code Daytime Telephone Number	
Name of Person Area Code Daytime Telephone Number	<u> </u>
	t.
Enclosed is a check for the following amount:	ا. ار
□ \$25.00 Filing Fee \$330.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee,	'n
(additional copy is enclosed) Certified Copy	
(additional copy is enclosed)	

MAILING ADDRESS:

Registration Section

TO:

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 Trading, L	
(Name of the Limited Liability Compan (A Florida Limited Li	y as it now appears on our records.) ability Company)
The Articles of Organization for this Limited Liability Company vi Florida document number <u>L 19 000 2 2 909 7</u>	vere filed on Sep10, 2019 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabil	ity company here:
The new name must be distinguishable and contain the words "Limited Liabilit	y Company," the designation "L.L.C." or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:  (Principal office address MUST BE A STREET ADDRESS)	611 West 11th Street Panama City FL 32401
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)	P. O. Box 37123 Panama City FL 32412
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here.	
Name of New Registered Agent:  New Registered Office Address:  6// V	N/A  Next 11th Street  Enter Florida street address
Pornov New Registered Agent's Signature if changing Registered Agents	na City, Florida 32401  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.

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

Title	<u>Name</u>	Address	Type of Action
N/A	N/A	N/A	
			□ Remove
			☐ Change
		200	□ Remove
			Change
			П Кеточе
			□ Change
			Add
		·	Remove
		<del></del>	Change
	<del></del>		D Add
			Remove
			Change
	<del></del>		□ Add
		<del></del>	Remove
			Change

	N/A
-	
•	
lote: If	e date, if other than the date of filing: JUM 1, 2020 (optional) ive 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 605.0 the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed t's effective date on the Department of State's records.
e reco The 9	rd specifies a delayed effective date, but not an effective time, at $12.01$ a.m. on the earlier 0th day after the record is filed.
ated _	July 1, 2020
	Signature of a member or authorized representative of a member
	Halaila Rahman

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Filing Fee: \$25.00