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COVER LETTER

Division of Corporations .		
SUBJECT: TASTES OF VIETNAM MARKET ELC. 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:		
YEN HOANG HO Name of Person		
TASTES OF VIETNAM MARKET LLC Firm/Company		
109 Del Prado Boulevard South		
CAPE CORAL FL 33993 City/State and Zip Code		
<u>Yenholgala VAHOO. Com</u> E-mail address: Ito be used for future annual report notification)		
For further information concerning this matter, please call:		
YEN HOANG HO at (954) 790 - 1729 Name of Person Area Code Daytime Telephone Number		
Enclosed is a check for the following amount:		
© \$25.00 Filing Fee		
Mailing Address: Registration Section Street Address: Registration Section		

Registration Section Division of Corporations P.O. Box 6327

TO:

Registration Section

Tallahassee, FL 32314

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

The Articles of Organization for this Limited Liability Company were filed on MHY 129 - 2020 and assigned Florida document number <u>L. 2000013446</u>5 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) inter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BOX) If amending the registered agent and/or registered office address on our records, enter the name of the new registered ent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

Registered Agent's Signature, if changing Registered Agent:

the appointment as registered agent and agree to act in this capacity. I further agree to comply with the sions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability my has been notified in writing of this change.

City

rerson(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
	VU LE	614 NW 16TH PL	🗀 Add
		CAPE CORAL. FL 33993	⊠ Remove
			□Change
AMBR	YEN HO	614 NW 16TH PL	□Add
		CAPE CORAL FL 33993	□Remove
			ØChange
			□Add
			Remove
			□Change
			□Add
_			□Remove
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			□Change

	
'an effectiv <u>lote:</u> If th	date, if other than the date of filing:
ecord sp is filed.	pecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of; (b) The 90th day after the
ed <u>M</u>	1AY 20 7020)in
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	Signature of a member or authorized representative of a member