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2		COVER LETTER	
Y FQ: Registration Se Division of Cor			·
SOARPRO	OMO LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Yachen Saur		
		Name of Person	
	SOARPROMO LLC		
		Firm/Company	
	11103 Green Bayberry Dr	ive	
		Address	
	Palm Beach Gardens, FL,	33418	
		City/State and Zip Code	
	tiffanyzhang.2020@gmail.c		
	E-mait address: (to be used for future annual report noti	fication)
For further information c	concerning this matter, please c	all:	
Yachen Saur		616 9157040 at ()	
Name o	of Person	Area Code Daytim	e Telephone Number
Enclosed is a check for t	he following amount:		
■ \$25.00 Filing Fce	☐ \$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 Address: 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

SOARPROMO LLC	
(Name of the Limited Liability Compa (A Florida Limited L	ny as it now appears on our records.) iability Company)
The Articles of Organization for this Limited Liability Company Florida document number <u>L22000459418</u> .	were filed on October 25, 2022 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabi	lity company here:
SOAR PROMO LLC	
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	11103 Green Bayberry Dr. Palm Beach Gardens, FL. 33418
(Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable:	11103 Green Bayberry Dr, Palm Beach Gardens, FL. 33418
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here: Name of New Registered Agent:	ddress on our records, <u>enter the name of the new registered</u>
Name of New Registered Agent.	<u> </u>
New Registered Office Address:	Enter Florida street address ASS
	City Sip Code
New Registered Agent's Signature, if changing Registered Agent:	SEC ω
I hereby accept the appointment as registered agent and agre- provisions of all statutes relative to the proper and complete paccept the obligations of my position as registered agent as paceing filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, and I am @nfliaf%ith and rovided for in Chapter 605, F.S. Or,武和is tocument is
If Chan	ging 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 ad or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
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Page 2 of 3

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ffective date, if other than an effective date is listed, the date ote: If the date inserted in the ocument's effective date on the	must be specific an is block does not:	id cannot be prior meet the applic	cable statutory fi	more than 90 day	(optional) s after filing.) Pur s, this date will	suant to 605.020 not be listed a
e record specifies a dela The 90th day after the	yed effective record is filed	date, but no	ot an effective	e time, at 12	01 a.m. on t	he earlier o
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Page 3 of 3

Filing Fee: \$25.00