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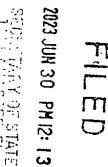
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2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

TO: Registration Section
Division of Corporations

Tallahassee, FL 32314

	DD BY SUNAN LLC				
SUBJECT.	Name of Lin	nited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
	Junjira Pumpijit				
		Name of Person	······································		
	THAI FOOD BY SUNAN	LLC	<u>.</u>		
THAI FOOD BY SUNAN LLC Fint/Company 1786 Imperial Golf Course Blvd.Apt102 Address Naples .FL 34110 City/State and Zip Code pumpijit6262@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Junjira Pumpijit 702 418-2972 at (
	1786 Imperial Golf Course	e Blvd.Apt102			
		Address			
	Naples ,FL 34110				
		City/State and Zip Code			
	E-mail address: (to be used for future annual report not	ification)		
For further information of	concerning this matter, please c	all:			
Junjira Pumpijit					
Name o	of Person	Area Code Daytin	ne Telephone Number		
Enclosed is a check for the	he following amount:				
□ \$25.00 Filing Fee		Certified Copy	■ S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
Registration Section Division of Corporations		Registration Section Division of Corporations			
P.O. Box 632		The Centre of			

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

THAI FOOD BY SUNAN ELC					
(<u>Name of the Limited Liability Compa</u> (A Florida Limited l	any as it now appears on our records.) Liability Company)				
The Articles of Organization for this Limited Liability Company	were filed on January 05, 2023 and assigned				
Florida document number L23000012154					
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limited liab	oility company here:				
101 MARKETING AGENCY LLC					
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the abbreviation "L.L.C."				
Enter new principal offices address, if applicable:	15130 Piping Plover Ct. Apt 101				
(Principal office address MUST BE A STREET ADDRESS)	Nort Fort Myers, FL 33917				
Enter new mailing address, if applicable:	15130 Piping Plover Ct. Apt 101				
(Mailing address MAY BE A POST OFFICE BOX)	Nort Fort Myers, FL 33917				
B. If amending the registered agent and/or registered office agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address:	Enter Florida street address				
New Registered Agent's Signature, if changing Registered Agent:	City Eip Code				

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.

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>	<u>Name</u>	Address	Type of Action
MGR	Junjira Pumpijit	15130 Piping Plover Ct.Apt101	□Add
		Nort Fort Myers FL33917	□ Remove
			□Add
			□Remove
			□Change
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