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A. RIVERS MAY - 6 2023

COVER LETTER

TO:	Registration Sec Division of Corp			
CHRIE	ERK TRINI	ITY LLC		
SUBJE	UI:	Name of Limi	ited Liability Company	
The enc	losed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please re	eturn all correspo	ndence concerning this matter	to the following:	
		SEUNG S KIM		
			Name of Person	
		ERK TRINITY LLC		
			Firm/Company	
		1008 BUENAVENTURA	BLVD. KISSIMMEE, FL 34743	
			Address	
		KISSIMMEE, FL 34743		
			City/State and Zip Code	
		INFINITY 1223@GMAIL.C	COM to be used for future annual report notifi	cation)
For furt	her information c	oncerning this matter, please ca		,
SEUNC	S. KIM		321 230-2169	
	Name o	f Person	Area Code Daytime	Telephone Number
Enclose	d is a check for th	ne following amount:		
d \$25	.00 Filing Fee	☐ \$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 Addres Registration 5		Street Address: Registration Sec	tion

Registration Section
Division of Corporations
P.O. Box 6327

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

ERK TRINITY LLC		
(<u>Name of the Limited Liability Co</u> (A Florida Limit	mpany as it now appears on our records.) ied Liability Company)	
The Articles of Organization for this Limited Liability Comparing the Linds of Organization for this Limited Liability Comparing the Linds of Comparing the Lind	any were filed on JANUARY 23, 2023	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited l	iability company here:	
The new name must be distinguishable and contain the words "Limited L	iability Company," the designation "LLC" or the a	bbreviation "L.L.C."
Enter new principal offices address, if applicable:		_ _
(Principal office address MUST BE A STREET ADDRESS	2	
		~ ~~
		2023 HA
Enter new mailing address, if applicable:		三 三 11
(Mailing address MAY BE A POST OFFICE BOX)		10 L
		77 B
		751 75
B. If amending the registered agent and/or registered offi agent and/or the new registered office address here:	ce address on our records, <u>enter the nar</u>	ne of the new registere
agent and/or the new registered office address here.		7 ~
Name of New Registered Agent:		
New Registered Office Address:		
_	Enter Florida street address	
	, Florida	
	City	Zin 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.

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	SEUNG S KIM	16645 WINGSPREAD LOOP WINTER GARDEN,	FI ≣Add
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Effective date, if other than the fan effective date is listed, the date many state. If the date inserted in this bedocument's effective date on the I	ist be specific and o lock does not me	cannot be prior to cet the applical	date of filing or ble statutory fil	more than 90 days	optional) after filing.) Pursus s, this date will no	int to 605.020 of be listed a
record specifies a delayed effecti d is filed.	ve date, but not a	an effective tim	ne, at 12:01 a.m	n on the earlier (of: (b) The 90th	day after the
Dated		2023	/			
Jaicu(
	\vee					
	2		rized representati	vo of a member		