L23000/58329

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SECRETARY OF STATE

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COVER LETTER

TO:

TO: Registration Division of	on Section Corporations		
	Vetwork LLC		
SUBJECT:	Name of Limited Liability Company es of Amendment and fee(s) are submitted for filing. respondence concerning this matter to the following: lan Horowitz Name of Person		
The enclosed Article	es of Amendment and fee(s) are su	bmitted for filing.	
Please return all corr	respondence concerning this matte	r to the following:	
	lan Horowitz		
		Name of Person	
	Horowitz Legal PLLC		
	_	Firm/Company	
	1900 Glades Road, Suite	355	
		Address	
	Boca Raton, FL 33431		
		City/State and Zip Code	
			·
For further informati		•	ification)
	on concerning this matter, pieases		
lan Horowitz	···	at ()	
Na	me of Person	Area Code Daytin	ne Telephone Number
Enclosed is a check t	for the following amount:		
≅ \$25.00 Filing Fe	ee S30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
<u>Mailing Ad</u> Registrati	Idress: on Section	<u>Street Address:</u> Registration Se	ection
_	of Corporations	Division of Co	
P.O. Box		The Centre of	
Lallahasse	ee, FL 32314	2415 N. Monro	e Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Sona Network LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on March 29, 2023 and assigned Florida document number _____L23000158329 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 "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address City

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 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>	<u>Address</u>	Type of Action
MGR	April Cooksey	4712 Admirality Way, Unit 435	□Add
		Marina Del Rey, CA 90292	□Remove
			Remove
			□Change
			□Add
			Remove
			□Change
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Effective date, if other than fan effective date is listed, the date Note: If the date inserted in thi document's effective date on the	must be specific s block does n	and cannot be pot meet the ap	prior to date of f plicable statu	iling or more than	i 90 davs after i	filing.) Pursu	uant to 60 ot be lis	5.0207 (ted as t
e record specifies a delayed efferd is filed.	ctive date, but	not an effectiv	ve time, at 12:	01 a.m. on the	earlier of: (b)	The 90th	ı day afte	er the
April 28		2023						
Dated			·					
Jaied								
- Alte.			>					

Filing Fee: \$25.00