## L23000403099

(Re	equestor's Name)
(Ac	ddress)
(Ac	ddress)
(Ci	ty/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(В	usiness Entity Name)
(Do	ocument Number)
Certified Copies	Certificates of Status
Special Instructions to	Filing Officer:

Office Use Only



900415881219

09/18/23--01024--007 \*\*25.00



Date of this notice: 08-31-2023

Employer Identification Number:

93-3187590

Form: SS-4

Number of this notice: CP 575 B

PASAY MANGO LLC EUNAH LAM MBR UNIT 8600 BOX 1077 DPO, AP 96515

For assistance you may call us at: 1-800-829-4933

IF YOU WRITE, ATTACH THE STUB AT THE END OF THIS NOTICE.

## WE ASSIGNED YOU AN EMPLOYER IDENTIFICATION NUMBER

Thank you for applying for an Employer Identification Number (EIN). We assigned you EIN 93-3187590. This EIN will identify you, your business accounts, tax returns, and documents, even if you have no employees. Please keep this notice in your permanent records.

Taxpayers request an EIN for their business. Some taxpayers receive CP575 notices when another person has stolen their identity and are opening a business using their information. If you did not apply for this EIN, please contact us at the phone number or address listed on the top of this notice.

When filing tax documents, making payments, or replying to any related correspondence, it is very important that you use your EIN and complete name and address exactly as shown above. Any variation may cause a delay in processing, result in incorrect information in your account, or even cause you to be assigned more than one EIN. If the information is not correct as shown above, please make the correction using the attached tear-off stub and return it to us.

Based on the information received from you or your representative, you must file the following forms by the dates shown.

Form 1065 03/15/2024

If you have questions about the forms or the due dates shown, you can call us at the phone number or write to us at the address shown at the top of this notice. If you need help in determining your annual accounting period (tax year), see Publication 538, Accounting Periods and Methods.

We assigned you a tax classification (corporation, partnership, estate, trust, EPMF, etc.) based on information obtained from you or your representative. It is not a legal determination of your tax classification, and is not binding on the IRS. If you want a legal determination of your tax classification, you may request a private letter ruling from the IRS under the guidelines in Revenue Procedure 2020-1, 2020-1 I.R.B. 1 (or superseding Revenue Procedure for the year at issue). Note: Certain tax classification elections can be requested by filing Form 8832, Entity Classification Election.

See Form 8832 and its instructions for additional information.

A limited liability company (LLC) may file Form 8832, Entity Classification Election, and elect to be classified as an association taxable as a corporation. If the LLC is eligible to be treated as a corporation that meets certain tests and it will be electing S corporation status, it must timely file Form 2553, Election by a Small Business Corporation. The LLC will be treated as a corporation as of the effective date of the S corporation election and does not need to file Form 8832.

## **COVER LETTER**

TO:

Registration Section

Tallahassee, FL 32314

Divi	sion of Corp	porations				
SUBJECT:	Pasay Mar	1go LLC				
SOBJECT.		<del></del>	ited Liability Company			
The enclosed	Articles of A	Amendment and fee(s) are sub-	mitted for filing.			
Please return	all correspoi	ndence concerning this matter	to the following:			
		Eunah Lam				
			Name of Person	***************************************		
		Pasay Mango LLC				
			Firm/Company			
		7901 4th Street N, Suite 30	Address	<del></del>		
		St. Petersburg, Florida, 337	702			
		St. retersburg, Florida, 337	City/State and Zip Code			
		PasayMango.LLC@gmail.co				
For further in	formation ec	E-mail address: ( oncerning this matter, please of	to be used for future annual report not all:	iffication)		
Eunah Lam			at ( 360. ) 726-3342			
	Name of	Person		ne Telephone Number		
Enclosed is a	check for th	c following amount:				
S \$25.00 F	iling 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)		
	ling Addres		Street Address:			
_	distration S ision of C		Registration Section Division of Corporations			
Division of Corporations P.O. Box 6327			The Centre of Tallahassee			

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Pasay Mango LLC				
(Name of the Limited Liability Compar (A Florida Limited L	ny as it now appears on our reciability Company)	ords.)		
The Articles of Organization for this Limited Liability Company  Florida document number L23000403099	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:			
The new name must be distinguishable and contain the words "Limited Liabili	ity Company," the designation "l	LLC" or the abbreviation "L.L.C."		
Enter new principal offices address, if applicable:		20		
(Principal office address MUST BE A STREET ADDRESS)		23		
Enter new mailing address, if applicable:	Unit 8600 Box 1077	70		
(Mailing address MAY BE A POST OFFICE BOX)	DPO, AP. 96515			
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:  New Registered Office Address:	eddress on our records, en			
	Litter Provider Street (datress			
	City	, Florida Zip Code		
New Registered Agent's Signature, if changing Registered Agent:	·	·		
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties provided for in Chapter 60	s, and I am familiar with and 05, F.S. Or, if this document is		

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
AMBR	Eunah Lam.	Unit 8600 Box 1077, DPO, AP 96515.	[X] Add
			□Remove
			Change
AMBR Jin Lam.	Jin Larn.	8437 Willow Hollow Lane, Elk Grove, CA 95624.	🖾 Add
			□ Remove
			UChange
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elfec	date, if other than t	nust be specific and c	annot be prior t	o date of filing or t	nore than 90 days afte	er tiling.) Pursuant to t	505.0207
<u>te:</u> 11	the date inserted in this t's effective date on the	block does not me	et the applica	ble statutory fili	ng requirements, th	is date will not be l	isted as
mici	e a circuive date on the	Department of 36	ne s records.				
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s tileo	specifies a delayed effec !.	nve date, but not a	n effective fin	ле, at 12:01 a.m.	on the earlier of: [	b) The 90th day at	Her the
	September 8.		2023				
ted				<u> </u>		i.	
ted	7)					l l	
red	Gun	In le	M_	Electron :	alla sianad	E. Jack/la	
ted _	_ Gun	Signature of a mo	ember or author	Electron : carrized representative	elly signed	Emeille	

Filing Fee: \$25.00