## L23000472720

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## **COVER LETTER**

Registration Section Division of Corporations

TO:

Seri and A	udrey Enterprises, LLC.		
SUBJECT:	Name of Lin	nted Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for tiling.	
Please return all correspo	ondence concerning this matter	to the following:	
	Se Ri Kim		
		Name of Person	
		Firm/Company	
	7814 Yale Harbor Dr		
		Address	
	Wesley Chapel, FL 33545		l,
	<del> </del>	City/State and Zip Code	
	sotonghub.solutions@gmai		
		to be used for future annual report notif	(cation)
For further information c	oncerning this matter, please c	all:	
Kihyun "Audrey" Kim		916 918-5252	
Name o	f Person	at () Area Code Daytime	: Telephone Number
Enclosed is a check for the	he following amount:		
□ \$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 S		Street Address: Registration Sec	tion
Division of C		Division of Corp	
P.O. Box 632	.7 ·	The Centre of T	
Tallahassee,	FL 32314	2415 N. Monroe	e Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

( <u>Name of the Limited Liability Compa</u> (A Florida Limited I	ny as it now appears on our records.) hability Company)	_
The Articles of Organization for this Limited Liability Company  Florida document number 1.23000472720	were filed on and and	assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
SOTONGHUB SOLUTIONS, 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:	7814 YALE HARBOR DR.	
Principal office address MUST BE A STREET ADDRESS)	WESLEY CHAPEL, FL 33545	
		.3
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
		•
3. If amending the registered agent and/or registered office agent and/or the new registered office address here:	iddress on our records, <u>enter the name of the i</u>	<u>register</u> -
New Call New Designation 1 Access		••
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	Planta	
<del></del>	, Florida	de

## New Registered Agent's Signature, if changing Registered Agent:

SERI AND AUDREY ENTERPRISES,LLC.

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.

City

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person\_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
			□Remove
			□Add
			<del></del>
			Change
		-13/1	Add
			□Remove
			⊡Change
			DAdd
			□Remove
			□Change
			□Remove
			Change
			🗀 Add
			□Remove
			T) Change

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<u>fote:</u> If the date inserted in this	he date of filing:	(optional) than 90 days after filing.) Pursuant to 605.0207 (1) quirements, this date will not be listed as the
record specifies a delayed effect is filed.	tive date, but not an effective time, at 12:01 a.m. on t	he earlier of: (b) The 90th day after the
OCT 26	. 2023	
	1/MM/ -	
	Signature of a member or authorized representative of a	1