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COVER LETTER

TO:

Registration Section

Division of Co	rporations		
oun more	ISU'S MARKETS	LLC	
SUBJECT:	Name of Limi	ted Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub-	nitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
		Č	
	Chian	Ming L. Hsu	
		Name of Person	
	 .	Firm/Company	
	C000		22-, 2
	8988 CF	R 643 BUSHNELL Address	7L 33513
		Addicas	
	b .	City/State and Zip Code	
	E-mail address: (t	or file agma: 1. Cov	/∕(ification)
For further information (concerning this matter, please ca		
			_
Chiao Ming	L. Hsu (NIKI)	at (770) 833 - Area Code Daytin	9628
Name o	of Person	Area Code Daytin	e Telephone Number
Enclosed is a check for t	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 Addre	er.	Street Address:	
Registration	Section	Registration Se	
Division of C	•	Division of Con	•
P.O. Box 632		The Centre of T	
Tallahassee,	ΓL 34314	2413 IN. Ι ΥΙ ΟΠΓΟ	e Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

HSU'S MARKE		
(A Florida Li	Company as it now appears on o imited Liability Company)	ar records.)
The Articles of Organization for this Limited Liability Con	npany were filed on Feb	ruary 0/2024 and assigned
The Articles of Organization for this Limited Liability Con Florida document number <u>L 240cco 6 o 47</u>)		1
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limite	d liability company here:	
HSU MARKET	, LLC	
The new name must be distinguishable and contain the words "Limited	d Liability Company," the designal	ion "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		2023
(Principal office address MUST BE A STREET ADDRE	<u>SS)</u>	<u> </u>
		22
		P 1
Enter new mailing address, if applicable:		<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)		- ; 0
		. ,
B. If amending the registered agent and/or registered o agent and/or the new registered office address here:	office address on our record	s, enter the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida str	out address
	Liner e tortua ser	
	City	, Florida Zip 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 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
			□Add
			□ Remove
			Change
			□Remove
			□Change
			□ Add
			□Remove
			□Add
			□ Remove
			□Change
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			□Remove
			□Change

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if an effect Note: I	e date, if other than the date of filing:
e record rd is file	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the d.
Dated _	February 22, 2024.
	Signature of a member or authorized representative of a member
	/
	Chico Ming Lee, Hsu Typed or printed-hame of signee