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(R€	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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ertified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

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COVER LETTER

Registration Section

P.O. Box 6327

Tallahassee, FL 32314

TO:

Division of Cor	porations		
	e Works, LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Yongho Sohn		
		Name of Person	
	Creative Metallurgy Const	alting LLC	
		Firm/Company	
	1611 Lyndale Blvd		
		Address	
	Maitland/ FL/ 32751		
		City/State and Zip Code	
	orchidshin@gmail.com		
	E-mail address: (to be used for future annual report notification)	一一三
For further information of	oncerning this matter, please c	all:	卷 6
Hye HS Shin		407 491-7077	TOP PH TO
Name o	f Person	at () Area Code Daytime Telephone N	2025 JAH 16 PH 4: 15 SECRETARY OF STATE TATLE APPROPRIES Import
Enclosed is a check for the	he following amount:		
□ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	Certified Copy Cer (additional copy is enclosed) Cer	.00 Filing Fee, rtificate of Status & rtified Copy litional copy is enclosed)
<u>Mailing Addres</u> Registration		Street Address: Registration Section	
Division of C		Division of Corporations	

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Creative Metallurgy Consulting LLC		
(<u>Name of the Limited L</u> (A I	Liability Company as it now appears on our records. Florida Limited Liability Company)	
The Articles of Organization for this Limited Liabi		and assigned
Florida document number L24000469534	. ,	
This amendment is submitted to amend the following	ng:	
A. If amending name, enter the new name of th	e limited liability company here:	
Creovative Works, LLC		
The new name must be distinguishable and contain the words	s "Limited Liability Company," the designation "LLC" or the a	ibbreviation "L.L.C."
Enter new principal offices address, if applicabl	e:	
(Principal office address MUST BE A STREET A	(DDRESS)	
Enter new mailing address, if applicable:		
<u>(Mailing address MAY BE A POST OFFICE BO</u>	<u></u>	
	stered office address on our records, <u>enter the na</u>	
agent and/or the new registered office address h	<u>ere</u> :	유민 교 등
		mon #
Name of New Registered Agent:		
New Registered Office Address:		, . .
New Registered Office Address.	Enter Florida street address	
	, Florida	
-	City , Fiorida _	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.

It 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	Hye HS Shin	1611 Lyndale Blvd. Maitland, FL 32751	■Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
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	January 06, 2025
ectiv	e date, if other than the date of filing: (optional) tive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.020
te: If	tive date is listed, the date must be specific and cannot be prior to date of filing of more than 90 days after filing.) Fulsdant to 005.050 the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a
umer	nt's effective date on the Department of State's records.
	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
s file	i.
ī	anuary 06, 2025
ed _	
	4-11-0-
	Signature of a member or authorized representative of a member

Filing Fee: \$25.00