## P20000012458

(R	lequestor's Name)			
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PICK-UP	☐ WAIT	MAIL		
(B	usiness Entity Name	e)		
(D	ocument Number)			
Certified Copies	Certificates	of Status		
Special Instructions to Filing Officer:				





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01/03/24--01026--003 \*\*35.00



## **COVER LETTER**

TO: Amendment Section Division of Corporations Joen Orlando , Inc NAME OF CORPORATION: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy (Additional Copy enclosed) is enclosed)

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

## **Articles of Amendment**

to

## Articles of Incorporation

of

The Soen Orlando, Inc.	
(Name of Corporation as currently	filed with the Florida Dept. of State)
P200000 12458	
(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607.1006. Florida Statutes, this <i>F</i> its Articles of Incorporation:	Ilorida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	The new
name must be distinguishable and contain the word "corporation," "co "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A "chartered," "professional association," or the abbreviation "P.A."	ompany," or "incorporated" or the abbreviation "Corp.,"
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS )	MA
	. "
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	MA
D. If amending the registered agent and/or registered office address:  Name of New Registered Agent	ess in Florida, enter the name of the
(Florida stree	et address)
New Registered Office Address:	Florida
10	City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with the second se	ith and accept the obligations of the position.
Signature of New Res	gistered Agent, if changing
Check if applicable  ☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e)	

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	P	Juny H. Man	14373 Sinbridge CTYCLE
Add			Winter Park, FL 34787
Remove 2) Change	P	Mun 60 Lee	800 N. Sohn Yang Ankur Orland, FL 32508
Add			Odust, FL 32608
Remove 3) Change			
Add			
Remove			· · · · · · · · · · · · · · · · · · ·
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change		_	- <del></del> -
Add			
Remove			

amending or adding adding adding additional sheets, if	necessary).	(Be specif	ic)					
Mix	1 Ow	Lee	will	be	leaving	44	President	an!
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an amendment provide	fam an ava	hanna radi	secification	n or cal	scellation of i	sued sh	ares.	
orovisions for implemen	iting the am	endment if	not contai	ned in t	he amendmer	t itself:		
(if not applicable, inc	dicate N/A)							
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The date of each amendment(s) adoption:date this document was signed.	, if other than the
Effective date <u>if applicable</u> :	
(no more than 90 days afte	r amendment file date)
Note: If the date inserted in this block does not meet the applicable statu document's effective date on the Department of State's records.	tory filing requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board of d action was not required.	rectors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders. The number of by the shareholders was/were sufficient for approval.	of votes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting must be separately provided for each voting group entitled to vote separately.	
"The number of votes cast for the amendment(s) was/were sufficie	nt for approval
by	."
(voting group)	
$\frac{12/21/23}{}$	
Signature Mystella	
(By a director, president or other officer – if dir selected, by an incorporator – if in the hands of	
appointed fiduciary by that fiduciary)	a receiver, trustee, or other court
r c l p	- -
Eun Soek Ba	
(Typed or printed name of p	erson signing)
President	
(Title of person signing)	