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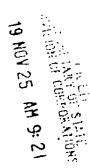
|                      | (Requestor's Name)       | ······ |
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| <del></del> -        | (Address)                |        |
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| PICK-UF              | P WAIT                   | MAIL   |
|                      | (Business Entity Name)   |        |
|                      | (Document Number)        |        |
| Certified Copies     | Certificates of S        | Status |
| Special Instructions | to Filing Officer:       |        |
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## **COVER LETTER**

|           | Registration Se<br>Division of Cor |  |   |  |                    |
|-----------|------------------------------------|--|---|--|--------------------|
| cub ica   |                                    | PROJECTS, LLC  |   | ?  |                    |
| SUBJEC    | CT:                                | Name of Lim  | ited Liability Company  |  | E TOUR             |
| The encl  | osed Articles of                   | Amendment and fee(s) are sub   | mitted for filing.  |  | NOVE WOOL          |
| Please re | turn all correspo                  | ndence concerning this matter  | to the following:   |  | <b>4</b> , 72, 73, |
|           |                                    | RAY MCGHEE   |   |  |                    |
|           |                                    |  | Name of Person  |  |                    |
|           |                                    | MCGHEE ACCOUNTING  | ì   |  |                    |
|           |                                    |  | Firm/Company  |  |                    |
|           |                                    | 5914 JOHNSON STREET  |   |  |                    |
|           |                                    |  | Address   |  |                    |
|           |                                    | HOLLYWOOD, FL 33027  | 7   |  |                    |
|           |                                    |  | City/State and Zip Code   | <del></del>  |                    |
|           |                                    | RMCGHEE-CPA@MCGH<br>E-mail address: (  | EEACCOUNTING.COM to be used for future annual report noti   | fication)  |                    |
| For furth | er information c                   | oncerning this matter, please co   | all:  |  |                    |
| RAY M     | ССНЕЕ                              |  | ari 305 ) <u>C12(0</u> -  | 5374   |                    |
|           | Name o                             | f Person   |   | e Telephone Number   |                    |
| Enclosed  | l is a check for th                | ne following amount:   |   |  |                    |
| \$25.0    | 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) |                    |
|           | Registr<br>Divisio<br>P.O. B       | ING ADDRESS:<br>ration Section<br>on of Corporations<br>ox 6327<br>assec, FL 32314 | STREET/COURI<br>Registration Section<br>Division of Corpor<br>Clifton Building<br>2661 Executive Ce | n<br>ations  |                    |

Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| ARTICLES OF AMENDMENT TO TO  |  |
|--|--|
| TO ARTICLES OF ORGANIZATION OF  FATHOM PROJECTS, LLC  (Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)  The Articles of Organization for this Limited Liability Company were filed on 02/28/2012 and assigned   |  |
| FATHOM PROJECTS, LLC   |  |
| (Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)  |  |
| The Articles of Organization for this Limited Liability Company were filed on 02/28/2012 and assigned  Florida document number L12000028634  |  |
| This amendment is submitted to amend the following:  |  |
| A. If amending name, enter the new name of the limited liability company here:   |  |
| The new name must be distinguishable and contain the words "Limited Liability Company," the designation "E.E.C" or the abbreviation "E.E.C."   |  |
| Enter new principal offices address, if applicable:  |  |
| (Principal office address MUST BE A STREET ADDRESS)  |  |
| Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)  |  |
| B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:   |  |
| Name of New Registered Agent:  |  |
| New Registered Office Address:  Enter Florida street address   |  |
| Florida  |  |
| City 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 |
|--------------|---------------|---|----------------|
| MGR          | MONALI ZAVERI | 19390 COLLINS AVENUE #1206<br>N MIAMI BEACH, FL 33160 | ■ Add          |
|              |               |   | ☐ Remove       |
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| (If an eff<br><u>Note:</u> | ive date, if other than the date of filing:   |
|                            | cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier o<br>90th day after the record is filed. |
| Dated                      | November 19 2019  |

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00