

L13 000 106696

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

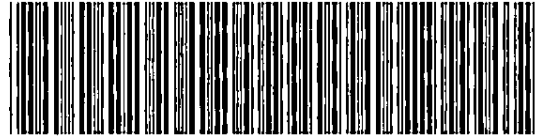
(Business Entity Name)

(Document Number)

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T SCHROEDER

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

CLOWNFISH 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 JULY 29, 2013 and assigned Florida document number L13000106696.

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 "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

4000 HOLLYWOOD BLVD

SUITE 140-N

HOLLYWOOD, FL 33021

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

4000 HOLLYWOOD BLVD

SUITE 140-N

HOLLYWOOD, FL 33021

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19 NOV -5 PM 2:18
CLERK OF THE COURT
HOLLYWOOD, FLORIDA

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: CORPORATE SERVICES INTERNATIONAL CONSULTING GROUP LLC

New Registered Office Address: 4000 HOLLYWOOD BLVD, SUITE 140-N

Enter Florida street address

HOLLYWOOD Florida 33021
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> | <u>Address</u> | <u>Type of Action</u> |
|--------------|-----------------|-------------------------------------|---|
| MGR | TIS MANAGER LLC | 4000 HOLLYWOOD BLVD, SUITE 140-N | <input checked="" type="checkbox"/> Add |
| | | HOLLYWOOD, FL 33021 | <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |
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 19 NOV - 5 PM
 18

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Multiple horizontal lines for amending information.

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STATE OF CONNECTICUT

E. Effective date, if other than the date of filing: 10/31/2019 (optional)

(If an effective 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 605.0207 (3)(b) **Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record 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 record is filed.

Dated OCTOBER 31 2019

Andrea Cecilia Di Fabio
Signature of a member or authorized representative of a member

ANDREA CECILIA DI FABIO
Typed or printed name of signer