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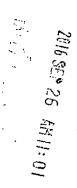
(Re	equestor's Name)	
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COVER LETTER

TO:	Registration Sec Division of Corp			
CUDIE	F & D Hold	_		
SUBJE	CI:		ited Liability Company	
The enc	losed Articles of A	Amendment and fee(s) are sub-	mitted for filing.	
Please re	eturn all correspor	ndence concerning this matter	to the following:	
		Richard P. Breger, Esq.		
			Name of Person	
		Breger Law Group		
		-	Firm/Company	
		20801 Biscayne Boulevard	, Suite 300	
			Address	
		Aventura, FL 33180		
			City/State and Zip Code	
		krisderen01@gmail.com		
			o be used for future annual report notific	cation)
For furth	ner information co	oncerning this matter, please ca	dl:	
Richard	P. Breger		305 945-7527	
	Name of	Person	Area Code Daytime	Telephone Number
Enclose	d is a check for the	e 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 ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

F & D Holdings, LLC		
(Name of the Limited Lia (A Flo	bility Company as it now appears on our records.) rida Limited Liability Company)	
The Articles of Organization for this Limited Liability	y Company were filed on February 24, 2003	and assigned
Florida document number L03000006556	 ·	
This amendment is submitted to amend the following	:	
A. If amending name, <u>enter the new name of the l</u>	imited liability company here:	
The new name must be distinguishable and contain the words "I	Limited Liability Company," the designation "LLC" or the abb	oreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET AD	DRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
		· 35
B. If amending the registered agent and/or re registered agent and/or the new registered office a	·	the name of the no
The state of the s		88 . 2
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	(b)
	Enier rioriaa sireei aaaress	· No
	, Florida	Zip Code
	Cuy	esp coue

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
D	Kris Deren	2808 N46TH AVE #E454	Add
		HOLLYWOOD, FL 33021	■ Remove
			☐ Change
			Add
			Remove
			☐ Change
			Add
			Remove Change
			Add Remove
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		-	□ Remove
			□ Change

		
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	[7] 1	Med
Effective date, if other than the date of filing: (options	ar e	cita :
Cffective date, if other than the date of filing:	ing.) Pursuant to	listed as
the record specifies a delayed effective date, but not an effective time, at 12:01 a.m.	n. on the e a	arlier o
The 90th day after the record is filed.		
September 23 2016		
Dated September 23 , 2016 .		
The 90th day after the record is filed. Dated September 23 , 2016 . Signature of a member or authorized representative of a member		_

Page 3 of 3

Filing Fee: \$25.00