

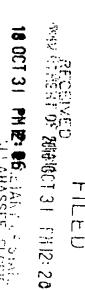
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COVER LETTER

Division of Corp			
SUBJECT: FCG LL	C		
	Name of Limit	ted Liability Company	
The enclosed Articles of A	Amendment and fee(s) are subr	nitted for filing.	
Please return all correspon	ndence concerning this matter t	to the following:	
	LUIS ANGEL ALICEA I	11	
		Name of Person	
	ANGEL FIBER ENGINEE	RING LLC	
		Firm/Company	
	2080 Oak Plains Rd.		
		Address	·
	Ashland City, TN 37015		
	ALICEA@FIBERCOREGR	City/State and Zip Code COUP.COM	
	E-mail address: (t	to be used for future annual report notific	cation)
For further information co	oncerning this matter, please ca	all:	
LUIS ALICEA		931 436-3491 at ()	
Name o	f Person	Area Code Daytime	Telephone Number
Enclosed is a check for the	ne 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

FCG LLC (Name of the Limit	ted Liability Compa	ny as it now appears on o	our records.)				
The Articles of Organization for this Limited L Florida document number L18000250393							
This amendment is submitted to amend the foll	owing:						
A. If amending name, enter the new name o	f the limited liab	ility company here:					
Angel Fiber Engineering LLC							
The new name must be distinguishable and contain the	vords "Limited Liabi	lity Company," the designa	ation "LLC" or the abbreviation "L.L.C."				
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		7756 Bass Ridge Tra	il				
		Tallahassee, FL 32312					
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		2080 Oak Plains Rd. Ashland City, TN 37015					
B. If amending the registered agent and registered agent and/or the new registered of Name of New Registered Agent:	l/or registered o office address her Luis Angel Ali	<u>re</u> :	26.1				
New Registered Office Address:	7756 Bass Ridge Trail		22 S				
		Enter Florida s	treet address SS 3				
	Tallahassee		, Florida 32312				
		City	Zip Co(te)				
New Registered Agent's Signature, if changing			- <u>S</u>				
I hereby accept the appointment as register	ed agent and ag	ree to act in this cape	acity. I further agree to comply with a				

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
or mo2	Luís Angel Alicea 111	7756 Bass Ridge Trail Tallahassee, FL 32312	
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Effective date, if other the (If an effective date is listed, the Note: If the date inserted is document's effective date of	date must be specifi this block does:	ic and cannot be pri	icabic statutory i	r more than 90 day	(optional) s after filing.) Pur s, this date will	suant to o	605.0 listed
the record specifies a c) The 90th day after t	elayed effecti he record is fi	ve date, but r led.	ot an effectiv	e time, at 12:	:01 a.m. on	the ea	rlie
Dated OCTOBER 30TH		2018	·				
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Filing Fee: \$25.00