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SECRETARY OF STATE STATE

A. ROBON JUL O B INN

## **COVER LETTER**

TO: Registration Section Division of Corporations							
SUBJE	SUBJECT: FANG HOLDINGS, LLC  (Name of Limited Liability Company)						
The enc	losed Articles of	Amendment and fee(s) are sub	mitted for filing.				
Please r	eturn all correspo	ondence concerning this matter	to the following:				
		Rita M. Scacchia					
			(Name of Person)				
		Brody Wilkinson PC					
	(Firm/Company)						
		2507 Post Road					
			(Address)				
		Southport, CT 06890					
			(City/State and Zip Code)	<u></u>			
For furt	her information o	concerning this matter, please c	all:				
Rita Sca	acchia		at (203 ) 319-7100				
(Name of Person)		of Person)	(Area Code & Daytime T	Celephone Number)			
Enclose	ed is a check for t	he following amount:					
<b>■</b> \$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		ration Section on of Corporations ox 6327	STREET/COURIER Registration Section Division of Corporation Clifton Building 2661 Executive Cente Tallahassee, FL 3230	ons er Circle			

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	LDINGS, LLC	<b>88</b>		
(Name of the Limited Liability Compar (A Florida Limited L	ny as it now appears on our records.) liability Company)			
The Articles of Organization for this Limited Liability Company	were filed on 11/4/2003	and assigned		
Florida document number 1 03000042646.	PH 2:			
This amendment is submitted to amend the following:		03		
A. If amending name, enter the new name of the limited liab	ility company here:			
The new name must be distinguishable and end with the words "Limi"L.L.C."	ted Liability Company," the designation	n "LLC" or the abbreviation		
Enter new principal offices address, if applicable:	27 Jeremiah Road			
(Principal office address MUST BE A STREET ADDRESS)	Sandy Hook, CT 06482			
Enter new mailing address, if applicable:	27 Jeremiah Road			
(Mailing address MAY BE A POST OFFICE BOX)	Sandy Hook, CT 06482			
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		er the name of the new		
Name of New Registered Agent:		***************************************		
New Registered Office Address:	(Enter Florida stree	t 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 608, 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 the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member <u>Title</u> **Type of Action** <u>Name</u> **Address** r Add Remove ☐ Add Remove ☐ Remove ☐ Add Remove \_ Add Remove Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Signature of a member or authorized representative of a member Diane M. Thompson, Manager Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00