L0500026885

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	Certificates	s of Status
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COVER LETTER

Division of Cor	porations		
SUBJECT:	FYP Enterp	rises, LLC	
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	Sterling Desorcy		
	. .	Name of Person	
	FYP Enterprises, LLC		
		Firm/Company	
	3899 Mannix Drive, #401		
		Address	
	Naples, FL 34114		
		City/State and Zip Code	
	sjdesorcy@gmail.com		
	E-mail address: (1	to be used for future annual report notifi	cation)
For further information co	oncerning this matter, please ca	all:	
Sterling Desorcy		239 289-5549	
Name o	f Person	at () 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:

TO:

Registration Section

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

FYP Enterpris			
(Name of the Limited Liability Comp. (A Florida Limited	nny as it now appears Liability Company)	s on our records.)	
The Articles of Organization for this Limited Liability Company Florida document number <u>L05000026885</u> .	were filed on	March 17, 2005	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	oility company he	<u>re</u> :	
The new name must be distinguishable and contain the words "Limited Liab	lity Company," the de	esignation "LLC" or the ab	breviation "L.L.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 of registered agent and/or the new registered office address here. Name of New Registered Agent: New Registered Office Address:	<u>·e</u> :	our records, enter	the name of the new
	 , ,		
 	City	, Florida	Zip Code
New Registered Agent's Signature, if changing Registered Agent	<u>:</u>		
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered office company has been notified in writing of this change.	e performance of provided for in C e address, I hereb	my duties, and I am f Chapter 605, F.S; Or,	familiar with and if this document is ni lability

Page 1 of 3

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person being added</u> <u>or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
MGR	Cheryl C. Desorcy	1939 Princess Court	■ Add
		Naples, DFL 34110	□ Remove
			☐ Change
MGR Anthony Carriero	Anthony Carriero	101 Washington Drive	
		Ramsey, NJ 07446	■ Remove
			Change
			□ Add
			Remove
			Change
			□ Add
			□ Remove
			□ Change
			Add
			Remove
			☐ Change
			ASSET OF REMARKS
			OF STATE Change

). If amending any	y other information, enter change(s) here: (Attach additional sheets, if neces	ssary.)	
· · · ·			
			
			
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(If an effective date is Note: If the date document's effect	if other than the date of filing:	filing.) Pursuant to 605.0207 date will not be listed as	the
	cifies a delayed effective date, but not an effective time, at 12:01 a. ay after the record is filed.	.m. on the eather of	•
Dated	February 1 2016		
	Signature of a member or authorized representative of a member	23	
	Sterling Perover 35 Typed or printed name of signee	FEB ID P	
	Page 3 of 3	ED b P 2: 09	
	Filing Fee: \$25.00	م سر	