L12000022264

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H15000200533 3)))

H15000200533ABCT

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : BROWARD SOHO SERVICES INC.
Account Number : I20100000080
Phone : (954)366-3850
Fax Number : ~~(954)960-5680~~ 954-633-7850

FILED
15 AUG 19 AM 8:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: TAXRIGHT7@YAHOO.COM

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
FENUS LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	$25.00

RECEIVED
15 AUG 19 PM 1:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

AUG 20 2015
J. HARRIS

Electronic Filing Menu Corporate Filing Menu Help

COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: FENUS LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

MARLIN A VELASQUEZ
Name of Person

FENUS LLC
Firm/Company

120 NW 47TH CT
Address

FORT LAUDERDALE, FL 33309
City/State and Zip Code

TAXRIGHT7@YAHOO.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MARLIN A VELSQUEZ at (954) 934-8666
Name of Person — Area Code — Daytime Telephone Number

Enclosed is a check for the 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

FENUS 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 02/15/2012 and assigned Florida document number L12000022264.

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 "L.L.C." or the abbreviation "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)

FILED
15 AUG 19 AM 8:59

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: MARLIN DE VELASQUEZ

New Registered Office Address: 5448 NE 1 TER
Enter Florida street address

FORT LAUDERDALE, Florida 33334
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

Title	Name	Address	Type of Action
MGR	MARLIN DE VELASQUEZ	5448 NE 1 TER FORT LAUDERDALE, FL 33334	■ Add ☐ Remove ☐ Change
MGRM	MARLIN A VELASQUEZ	120 NW 47TH CT FORT LAUDERDALE,FL 33309	☐ Add ■ Remove ☐ Change
MBR	WILLIAM N DEL CID	120 NW 47TH CT FORT LAUDERDALE, FL 33309	☐ Add ■ Remove ☐ Change
			☐ Add ☐ Remove ☐ Change
			☐ Add ☐ Remove ☐ Change
			☐ Add ☐ Remove ☐ Change

FILED
15 AUG 19 AM 8:59

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

E. Effective date, if other than the date of filing: 8/17/2015 (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 AUGUST 17 2015

Signature of a member or authorized representative of a member

MARLIN A VELASQUEZ

Typed or printed name of signee

FILED
15 AUG 19 AM 8:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Filing Fee: $25.00