U12000036647

Office Use Only



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COVER LETTER

TO: Registration Section
Division of Corporations

FNX Technologies, 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:

Samuel B. Reiner, II.

Name of Person

Reiner & Reiner, P.A.

Firm/Company

9100 South Dadeland Blvd., Suite 901

Address

Miami, FL 33156

City/State and Zip Code

sbr@reinerslaw.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Diana Escobar

_{....}305 \670-8282

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

Name of Person

□ \$25.00 Filing Fee

■\$30.00 Filing Fee & Certificate of Status

□\$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

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**

FNX Technologies, 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 Comp Florida document number <u>L12000036647</u>	oany were filed on <u>3/14/2012</u>	and assigned
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 end with the words "I "L.L.C."	Limited Liability Company," the designation "L	LC" or the abbreviation
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS	5)	
		22
	; -	59 5. 71
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		SER 6
B. If amending the registered agent and/or registered registered agent and/or the new registered office address		PRICE TRAINER OF the nev
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street add	ress
	, Florida	
	City	Zip Code
New Degistered Agent's Signature if changing Degistered Agent	ant.	

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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member

• . . .

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGMR	FELIX OIL & GAS, SLU	9100 S. Dadeland Blvd., Suite 901 Miami, FL 33156	Add
- "			Remove
MGMR	FNX OIL&GAS LLC	9100 S. Dadeland Blvd., Suite 901 Miami, FL 33156	Add
			Remove
		- in the second	Add
			NAY OF
			STATE Add
			Remove
			_ Add
			Remove
			Add
			Remove

. If amen	ding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
_	
_ Ju	ly 172013
ated	
	Signature of a member or authorized representative of a member
	Samuel B. Reiner
	Typed or printed name of signee

Filing Fee: \$25.00