## L13000032786

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## **COVER LETTER**

Registration Section Division of Corporations

TO:

	AB F	ISH, LLC	•		
SUBJECT:		Name of Limi	ted Liability Company		<del></del>
The enclosed Artic	eles of Am	endment and fee(s) are sub	mitted for filing.		
Please return all co	orresponde	nce concerning this matter	to the following:		
		JAMES D.			
			Name of Person		
		AB FIS	SH, LLC.		
			Firm/Company	_	
		363 BAR	RY AVENUE	<del>-</del> -	
			Address		
		LITTLET	ORCH KEY, FL 33042		
			City/State and Zip Code		
	-	hanstish l@gn E-mail address: ()	nail.com to be used for future annual r	eport notification	on)
For further inform	ation conc	erning this matter, please ca			
JAMES D. HA	NSO <u>N</u>		at ( <u>305</u> ) Area Code	494-5122	
	Name of Pe	rson	Area Code	Daytime Tel	ephone Number
Enclosed is a chec	ck for the f	ollowing amount:			
₹X \$25.00 Filing	Fee	□ \$30.00 Filing Fee & Certificate of Status	S55,00 Filing Fee & Certified Copy (additional copy is encl		☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Address: ation Sec	tion	<u>Street Ad</u> Registra	dress: ition Section	n
Divisio	on of Corp		Division	i of Corpora	ations
	ox 6327 issee, FL	32314			reet, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

AB FISH, LL			
(Name of the Lim	ited Liability Company as it no (A Florida Limited Liability C	ow appears on our records (ompany)	<u>.</u> )
he Articles of Organization for this Limited I lórida document number <u>L13000032786</u>	Liability Company were file	ed on <u>March 4, 2013</u>	and assigned
his amendment is submitted to amend the fol	lowing:		
. If amending name, enter the new name of	of the limited liability con	apany here:	
	N/A		
he new name must be distinguishable and contain the	words "Limited Liability Comp.	any," the designation "LLC"	
nter new principal offices address, if appli	cable:	N/A	2020 SE:
Principal office address MUST BE A STRE	ET_ADDRESS)		N 1 =
Inter new mailing address, if applicable:		N/A	PH 6
Mailing address MAY BE A POST OFFICE	<u> </u>		্ৰ ত্
3. If amending the registered agent and/or gent and/or the new registered office addr	registered office address ess here:	on our records, enter	the name of the new regi
gent and/of the new registered office addi-			
Name of New Registered Agent:	GBU FISH, INC.		
·	GBU FISH, INC.  363 BARRY AVE	Enter Florida street address	v
Name of New Registered Agent:			s orida

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. GBU FISH, INC.

Pres.

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 N	dember -

N/A

<u>Title</u>	Name	<u>Address</u>	Type of Action
			□ Add
			□Remove
			Change
			□Add
			□Remove
			□ Change
	·		□Add
			□Remove
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			□Remove
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	,		□Add
			□ Change
			□Remove
			□Change

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