

L140000171590

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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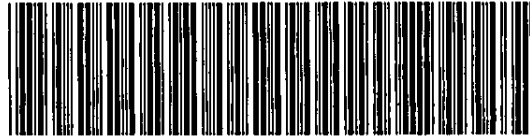
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

4/26/16 QS

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Fistel Enterprises, 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:

Liliana Fistel

Name of Person

Firm/Company

267 Oceanic Ave

Address

Fort Lauderdale, FL 33308

City/State and Zip Code

lilianafistel@hotmail.com

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

For further information concerning this matter, please call:

Liliana Fistel

Name of Person

at (954) 562-1129

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

FILED
APR 25 PM 4:40
TALLAHASSEE, FL 32301
SECRETARY OF STATE

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

Fistel Enterprises, 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 11/04/14 and assigned Florida document number L 14000171590.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Fistel Management, LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

267 Oceanic Ave.
Fort Lauderdale, FL 33308

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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:

New Registered Office Address:

Enter Florida street 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 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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Liliana Fistel	8751 Commodity Circle Orlando, FL 32819	<input checked="" type="checkbox"/> Add Suite 14 <input type="checkbox"/> Remove
		(Please add "Suite 14")	<input checked="" type="checkbox"/> Change
AMBR	Liliana Fistel	8751 Commodity Circle Orlando, FL 32819	<input checked="" type="checkbox"/> Add Suite 14 <input type="checkbox"/> Remove
		(Please add "Suite 14")	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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(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)(c):

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

Dated April 22, 2016.

Lester Fish

Liliana Fiste/

Page 3 of 3

Filing Fee: \$25.00