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SECRETARY OF STATE TALLAHASSEE, FLORID

2015 JUN 30 FP 2: 03

JU O PRICE

COVER LETTER

Division of Cor	porations				
Fluid Busir SUBJECT:	ness Resorces LLC				
JUBILET.	Name of Lim	ited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
	Isaiah Lowe				
	· · · · · · · · · · · · · · · · · · ·	Name of Person			
	Fluid Business Resorces L.	LC			
Firm/Company					
					
	Boca Raton, FL 33431				
		City/State and Zip Code			
	lowe320@gmail.com		Z£	2011	
	E-mail address: (to be used for future annual report notifica	tion)	در د	П
For further information of	oncerning this matter, please c	all:	HASSE	2015 JUN 30 P 2: 03	
Jeremiah Lowe		914 497-3590 at ()_			
Name o	of Person	Area Code Daytime T	elephone Number 🚍 🗸	<u>-</u>	
			elephone Number CRA	. 0	
Enclosed is a check for the	he following amount:			· w	
■ \$25,00 Filing Fec	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing F Certificate of S Certified Copy (additional copy is	Status & /	

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

Fluid Business Resorces LLC	
(Name of the Limited Liability Company as it no (A Florida Limited Liability C	ow appears on our records.) ompany)
The Articles of Organization for this Limited Liability Company were fill lorida document number L15000059523	ed on 04/03/2015 and assigned
his amendment is submitted to amend the following:	
. If amending name, enter the new name of the limited liability con	npany here:
luid Business Resources LLC	
ne new name must be distinguishable and contain the words "Limited Liability Compa	any," the designation "LLC" or the abbreviation "L.L.C."
nter new principal offices address, if applicable:	
Principal office address MUST BE A STREET ADDRESS)	
nter new mailing address, if applicable:	
	i
Mailing address MAY BE A POST OFFICE BOX)	ASEC 2015
. If amending the registered agent and/or registered office ade	
. It amending the registered agent and/or registered office address here:	dress on our records, enterthe mame of the
	T True
Numa of Navy Pagistared Agents	STA:
Name of New Registered Agent:	ତ୍ରିଲ ପ୍ର
New Registered Office Address:	
	Enter Florida street address
	, Florida
City	Zıp 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

GR = M $MBR = A$	lanager Authorized Member		
<u>itle</u>	Name	Address	Type of Action
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			Remove
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lote: If the date ins	serted in this block of	loes not meet the	applicable statuto	ry filing requiren	ents, this this	will hot be listed:
ocument's effective	e date on the Depart	ment of State's re-	cords.		E O	
					S. L. S.	C 1
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The 90th day a	ifter the record	is filed.	at not an ene	ceive cirrie, ac		
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