L15000160748

(Re	questor's Name)	······	
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(City/State/Zip/Phone #)			
PICK-UP	☐ WAIT	MAIL	
(Bu	siness Entity Name	e)	
(Do	cument Number)		
Certified Copies	_ Certificates	of Status	
Special Instructions to	Filing Officer:		
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COVER LETTER

TO:	Registration Se Division of Cor			
SUBJE	FONTENA	Y, LLC		
SOLUL		Name of Lim		
The end	closed Articles of a	Amendment and fee(s) are sub	mitted for filing.	
Please 1	return all correspo	ndence concerning this matter	to the following:	
		FRANCOIS MONOT		
		<u></u>	Name of Person	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
		FONTENAY, LLC		
			Firm/Company	
		20801 BISCAYNE BOUL	EVARD SUITE 403 # 1001	
			Address	
		AVENTURA, FL 33180		
			City/State and Zip Code	
		FABRICE.MCHCONSULT	-	
			to be used for future annual report notif	ication)
For furt	her information co	oncerning this matter, please ca	all:	
FABRI	ICE HERZSTEIN		786 521-3977	
	Name of	Person		Telephone Number
Enclose	ed is a check for th	e following amount:		
\$25	5.00 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

FILED 2015 OCT -1 PM 3: 56

FONTENAY, LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) ____ and assigned Florida document number _L15000160748 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 "LLC" 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) 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

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.

City

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>	Name	Address	Type of Action
MGR	FMVD HOLDING LLC	20801 BISCAYNE BOULEVARD	= Add
		SUITE 403 # 1001	□ Remove
		AVENTURA, FL 33180	□ Change
			Add
			□ Remove
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		**************************************	□ Add
			Remove
			□ Change
			Add
			□ Remove
			□ Change

D. If am	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)			
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(If an ef	tive date, if other than the date of filing: (optional) fective date is listed, the date must be specific and cannot be prior to date of liling or more than 90 days after filing.) Pursual	nt to 605.020	بب 7 (إ(ه)	ن
<u>Note:</u> docum	If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not nent's effective date on the Department of State's records.	i be listed a	s the	
	ecord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the egoth day after the record is filed.	earlier o	of:	
Dated	SEPTEMBER 28TH 2015			
	Signature of a member or authorized representative of a member			
	FRANCOIS MONOT			
	Typed or printed name of signee			

Page 3 of 3

Filing Fee: \$25.00