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Division of Cor			
FISHER FA	AMILY GROUP LLC		
SOBSECT.	Name of Lim	ited Liability Company	
	Amendment and fee(s) are sub	_	
	Hannah B Fisher		
		Name of Person	
	FISHER FAMILY GROU	P LLC	
	· · · · · · · · · · · · · · · · · · ·	Firm/Company	
	17622 Cadena Drive		
		Address	,
	Boca Raton, Florida 33496	5	
	- Phillips to 2	City/State and Zip Code	
	hbloom123@hotmail.com		
For further information c	e-mail address: (to be used for future annual report notificall:	2016 JAN 2 SECRETAR
Michael Fisher		617 852-1844 at ()	AN 2
	f Person		Telephone Number Ex FURSIA
Enclosed is a check for the	he following amount:		10 A
\$25.00 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

Tailahassee, 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

FISHER FAMILY GROUP 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 December 15, 2015 and assigned Florida document number L15000207982 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: 2015 Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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

Floridă

Zip Code

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>	Address	Type of Action	
AMBR	Hannah B Fisher	17622 Cadena Drive, Boca Raton, l	■ Add	
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ctive date, if other than the date of filing: effective date is listed, the date must be specific and cannot be prior to date. If the date inserted in this block does not meet the applicable ment's effective date on the Department of State's records.	ate of filing of statutory fi	r more than 9 lling require	(optional) 0 days after filing ments, this date	.) Pursuant	to 605. De liste
record specifies a delayed effective date, but not ar he 90th day after the record is filed.	n effectiv	e time, at	12:01 a.m.	on the	earlie
January 19th 2016					
2 0 0) , (\supset			
Signature of a member or authorized	· · · · · · · · · · · · · · · · · · ·				

Page 3 of 3

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