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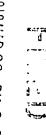
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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Ton of Fish 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:
Michael Tondreault Name of Person
Firm/Company
6515 Channelside Terrace N Address
Pinellas Park, FL 33781 City/State and Zip Code M 5+0ndro@amail.com E-mail address: (to be used for future annual report notification)
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Michael Tondreault at (727) 486-5201 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
S25.00 Filing Fec

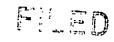
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MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

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



2019 MAR 20 PM 2: 31

$ \frac{1}{2}$ $\frac{1}{2}$	Fish, CCC
(A Florida)	Company as it now appears on our records.) Limited Liability Company)
	~ ~ · · · · · · · · · · · · · · · · · ·
The Articles of Organization for this Limited Liability Co	ompany were filed on May 4, 2016 and assigned
Florida document number LIGOGG \$8340	<u>7</u> .
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limit	ted liability company here:
N/A	
The new name must be distinguishable and contain the words "Limit	ed Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	4515 Channelside Ter N
(Principal office address MUST BE A STREET ADDRE	ESSI finellas Park, FL 33781
	,
Enter new mailing address, if applicable:	6515 Channelside Ter N
(Mailing address MAY BE A POST OFFICE BOX)	Co515 Channelside Ter N Pinellas Park, FL 33781
B. If amending the registered agent and/or regist.	ered office address on our records, enter the name of the new
registered agent and/or the new registered office addr	
	Ichael Tondreault
	15 Channels de Ter N Enter Florida stroet address
Pin	ellas Park Florida 33781 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>	Name	Address	Type of Action
Director	Thomas Fisher	7873 Causeway Bird N	
		St. Petersburg, Fl 3370	7_Remove
			🗆 Change
<u>Coo</u>	Betty Fisher	7873 Causeway Bird N	
		St Petersburg, Fr. 3370	7 Remove
			□ Change
CEO	Stephen Tondreault	9251 37th St N	
		Pinellas Park, Fi 3373	2 🗆 xemove
			Change
			🗖 Add
			_□ Remove
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If an eff	ive date, if other than the date of filing: May 5, 2019 (optional) Excitive 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) If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the sent's effective date on the Department of State's records.
	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 90th day after the record is filed.
Dated	March 17 . 2019.
	Signature of a member or authorized representative of a member
	Michael Tondreault Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00