## L16000/68778

(Re	questor's Name)	
(Add	dress)	
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(Cit	y/State/Zip/Phone	<del>: #)</del>
PICK-UP	☐ WAIT	MAIL
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(Do	cument Number)	· · · · · · · · · · · · · · · · · · ·
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## **COVER LETTER**

Division of Corporations				
SUBJECT:		NCIAL GROUP, INC		
		Name of Limit	ed Liability Company	
The enclosed	d Articles of A	mendment and fee(s) are subm	nitted for filing.	
Please return	all correspon	dence concerning this matter to	o the following:	
		ORLANDO J SILVA		
			Name of Person	
		MAS FINANCIAL GROUP	P, INC	
			Firm/Company	•
		2853 EXECUTIVE PARK	DRIVE 105	
			Address	
		WESTON, FL 33331		
			City/State and Zip Code	
		ojs@masfinancialgroup.com		
		E-mail address: (to	be used for future annual report notifica	tion)
For further i	nformation co	ncerning this matter, please cal	11:	
ORLANDO	SILVA		954 873-9018 at ( )	
	Name of	Person	at ()	elephone Number
Enclosed is	a check for the	following amount:		
■ \$25.00 E	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:

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

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
MGR	ROBERT BATISTA	2853 EXECUTIVE PARK DRIVE	<b>=</b> Add
		SUITE 105	□ Remove
		WESTON, FL 33331	□ Change
MGRM DIEGO POGGIO	DIEGO POGGIO	2853 EXECUTIVE PARK DRIVE	□ Add
		SUITE 105	■ Remove
	WESTON, FL 33331	☐ Change	
MGRM DOLKA POGGIO	2853 EXECUTIVE PARK DRIVE	□ Add	
		SUITE 105	■ Remove
	WESTON, FL 33331	Change	
			Remove  OF Compge  OF
			□ Add
		☐ Change	

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FISH SHOP COMPANY, LLC		
( <u>Name of the Limited Liabili</u> (A Florida	ty Company as it now appears on our records Limited Liability Company)	<u>s.</u> )
The Articles of Organization for this Limited Liability C	company were filed on 09/09/2016	and assigned
Florida document number L16000168778	_ <del>.</del> .	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	ited liability company here:	
The new name must be distinguishable and contain the words "Lim	ited 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 ADDR	(ESS)	·
		<u> </u>
		T DI PISION OF
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or regis registered agent and/or the new registered office add		s, enter the name of the new
The state of the s		
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street addres.	s
		orida
	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

O. If amo	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	•
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-	HOOT LT PH 4: 31  ON USIGN OF CORRECTIONS  ON USIGN OF CORRECTIONS
•	<u></u>
-	<i>C'</i>
-	
(If an ef Note:	ive date, if other than the date of filing:  [10/04/2016]  [fective 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)(1)  If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the nent'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	10/04/2016
_	Signature of a phember or authorized representative of a member
	DIEGO POGGIO

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00