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COVER LETTER

TO:	Registration Secti Division of Corpo		f .	- .
SUBJ	FCT. FELT	PRUSINESS	GROUP, LLC	,
зора	<u></u>	Name of Lim	GROUP LLC ited Liability Company	<u> </u>
The er	nclosed Articles of Ar	mendment and fee(s) are sub	omitted for filing,	
Please	return all correspond	lence concerning this matter	to the following:	
		A. JURDA	AN FEUX Name of Person	
			Name of Person	
			Firm/Company	
		131 DWAI	STATION RD	STE 107:304
		1000000	Address	
		TACKSONVII	18. F1 37	2718
			City/State and Zip Code A J F E S Q. (0)	
		ASQ	AJFESO. (O	M
		E-mail address: (to be used for future annual repo	ort notification)
For fu	rther information con-	cerning this matter, please c	all:	
А	. JORDAN F	'F I (Y	any.	103 1009
	Name of P		at (<u>°[0</u> 7]) Area Code = 1	103 109 Daytime Telephone Number
Enclos	sed is a check for the	following amount:		
. 1	25.00 Filing Fee	☐ \$30.00 Filing Fee &	S55.00 Filing Fee &	☐ \$60.00 Filing Fee.
7	20.00 Filling Fee	Certificate of Status	Certified Copy	Certificate of Status &
			(additional copy is enclose	d) Certified Copy (additional copy is enclosed)
		4		
/	 Mailing Address: Registration See 	otion	<u>Street Addr</u> Registratio	
	Division of Cor			f Corporations
ļ	P.O. Box 6327	p. 22. 20. 20. 20. 20. 20. 20. 20. 20. 20		e of Tallahassee
,	Tallahassee, FL	32314		Ionroe Street, Suite 810
•			Tallahasse	e, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	NESS GROUP, LLC 2 11 2:17
(<u>Name of the Limited</u> (/	Liability Company as it now appears on our records.) A Florida Limited Liability Company)
The Articles of Organization for this Limited Lial Florida document number $_$ \bot 1 0 0 0 1	oility Company were filed on 102206 and assigned 83632
This amendment is submitted to amend the follow	ving:
A. If amending name, enter the new name of t	he limited liability company here:
The new name must be distinguishable and contain the wor	ds "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applical	ole:
(Principal office address MUST BE A STREET	ADDRESS)
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BO	<u> </u>
	
B. If amending the registered agent and/or reg agent and/or the new registered office address	istered office address on our records, <u>enter the name of the new registerec</u> here:
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	, Florida City Zip Code
New Registered Agent's Signature, if changing Re	gistered 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 our records:

MGR = Manager

AMBR = Authorized Member

.Title	<u>Name</u>	Address	Type of Action
MOR	LAPORSCHA FELIX	731 DUNAL STATION RD STE 107-304	XAdd
		JACKSONVILLE, FL 32218	□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			🗆 Add
			□Remove
			□Change
			□Add
		-	□Remove
			Change
			□Add
			□Remove
			□Change

(If an e Note	etive date, if other than the date of filing:
ord is	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the filed.
Date	JUNE 25 . 2020. Jordon Julion Signature of a member or authorized representative of a member A. JURDAN FELIX
	Signature of a member or authorized representative of a member
	A. JURDAN FELLX Typed or printed name of signee
	Typed or printed game of clapse

The case of