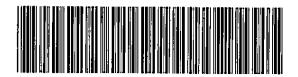
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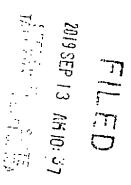
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(Cit	ty/State/Zip/Phone	#)
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(Do	cument Number)	
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COVER LETTER

	Registration S Division of Co.			
eun uco	Ferenginar	LLC		
SUBJEC	т:		ited Liability Company	
The enclo	osed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please ret	turn all correspo	ondence concerning this matter	to the following:	
		Barett Windish		
		Ferenginar LLC	Name of Person	
		1904a Hollywood Blvd	Firm/Company	
		Hollywood FL 33020	Address	
		bwindish@hotmail.com	City/State and Zip Code	
			to be used for future annual report notif	ication)
For furthe	er information c	oncerning this matter, please ca	all:	
Barrett W		f Person	954 668-0004 at () Area Code Daytime	Telephone Number
Enclosed	is a check for t	he following amount:		
■ \$25.0	0 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)

P.O. Box 6327

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Ferenginar LLC		
(<u>Name of the Limited Liability C</u> (A Florida Lin	ompany as it now appears on our records.) nated Liability Company)	
The Articles of Organization for this Limited Liability Completion of Hamiltonian Limited Liability Complete Liability Complet	pany were filed on 6/13/2017	and assigned
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 ADDRES.	<u> </u>	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1904a Hollywood Blvd Hollywood Fl. 33020	
B. If amending the registered agent and/or registere registered agent and/or the new registered office address Name of New Registered Agent: New Registered Office Address:		the name of the new
New Registered Agent's Signature, if changing Registered Ag	ent:	

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> MGR	<u>Name</u> Ken Hansted	Address	Type of Action
———			
		1600 Collins Ave, Sunny Isles Beach FL 33160	■ Remove
			☐ Change
MGR	Jorge Velez	3001 S Ocean Dr. #717 Hollywood FL 33019	Add
			☐ Remove
			☐ Change
<u> </u>			□ Add
			Remove
			☐ Change
			□ Add
			☐ Remove
			☐ Change
			☐ Remove
			Change
			Remove
			Change

						
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Note:	tive date, if other the flective date is listed, the d . If the date inserted in ment's effective date on	this block does not n	neet the applicabl	date of filing or more the statutory filing req	(optional) am 90 days after filing.) uirements, this date v	Pursuant to 605.0207 (3)(will not be listed as the
	cord specifies a de 90th day after th			n effective time	, at 12:01 a.m. c	on the earlier of:
Dated	September 10	Signature of a r	2019	ed representative of a r	A L	
	Barrett Windish					

Typed or printed name of signee