L17000'256300

(Re	equestor's Name)	
(Ad	ldress)	
(Ac	ldress)	
(Cit	ty/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Name)	
(Do	ocument Number)	
Certified Copies	Certificates of	Status
Special Instructions to	Filing Officer:	

Office Use Only



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COVER LETTER

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TO:	Registration So Division of Cor			
er:bir	Fix PC LL	С		
SUBJE.	CI:	Name of Lim	ited Liability Company	
The enc	losed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please r	eturn all correspo	ondence concerning this matter	to the following:	
		Eric Swain		
		Fix PC LLC	Name of Person	
			Firm/Company	
		1705 Palm Cove Blvd 1-	-107	
		Delray Beach FL, 33445	Address	
		e.swain27@gmail.com	City/State and Zip Code	
		E-mail address: (to be used for future annual repo	ert notification)
For furt	her information c	oncerning this matter, please ca	all:	
Eric Sv	vain		561 57812 at ()	20
	Name o	f Person	Area Code I	Daytime Telephone Number
Enclose	d is a check for th	ne following amount:		
■ \$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)
	Registr Divisio P.O. Bo	ING ADDRESS: ration Section on of Corporations ox 6327 assee, FL 32314	Registration Division of C Clifton Build	Corporations

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Fix PC LLC					
(Name of the Limited (A	Liability Compa Florida Limited 1	i <mark>ny as it now appears on ou</mark> Liability Company)	r records.)		
he Articles of Organization for this Limited Liab		were filed on 12/15/18		and assig	gned
lorida document number L17000256300	·				
his amendment is submitted to amend the following	ing:				
. If amending name, enter the new name of th	e limited liab	ility company here;			
ot changing					
he new name must be distinguishable and contain the word	s "Limited Liabi	lity Company," the designati	on "LLC" or the abbrev	iation "L.L.	C."
Enter new principal offices address, if applicable: Principal office address MUST BE A STREET ADDRESS)		not changing		ळ	
				 	<u> </u>
				<u></u>	-3 <u>-3-3-</u>
nter new mailing address, if applicable:		not changing		A	
(Mailing address MAY BE A POST OFFICE BOX)				7:	112
	 7				差
. If amending the registered agent and/or gistered agent and/or the new registered offic	• •		records. <u>enter the</u>	name o	f the n
Name of New Registered Agent.					
New Registered Office Address:	1705 Palm Co	ove Blvd 1-107			
	Dolray Bacab	Enter Florida stre			
-	Delray Beach	City	, Florida <u>33445</u>	Zip Code	
		Ciţ	•	ор Сош	

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

Title	Name	Address	Type of Action
MGR	Alexander Furman	1705 Palm Cove Blvd 1-107 Delray Beach FL 33445	Add
			■ Remove
	Eric Swain		☐ Change
MGR	Enc Swain	Delray Beach FL 33445	■ Add
			☐ Remove
			□ Change
			☐ Remove
			□ Change
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				A.	
				7: 2	AH Jane
					
ctive date, if other than the d effective date is listed, the date must b e: If the date inserted in this bloc iment's effective date on the Dep	e specific and cannot be jik does not meet the ap	prior to date of filing plicable statutory	or more than 90 days aff	tional) ter filing.) Pursuant t his date will not be	to 605.0 e listed
record specifies a delayed one 90th day after the recor		not an effecti	ve time, at 12:01	a.m. on the e	arlier
, September 21,	2018				
ed		· ·			
	6.1	1	\rightarrow		
<u>-</u>	gnature of a member or	authorized represent	ative of a member		_

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Filing Fee: \$25.00