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(((H180000801613)))



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Division of Corporations

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From:

Account Name

: DELOACH, HOFSTRA & CAVONIS, P.A

Account Number : I19990000123

Phone Fax Number

: (727)393-5418

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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FINALLY! II, LLC

K. SALY MR29 2018

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FACIMILE AUDIT NO.: H18000080161 3

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FINAL	Lyi II, llc	28
(Name of the Limited Limbility C		records)
The Articles of Organization for this Limited Liability Com Torida document number L18000056428	pany were filed on March 2,	2018 and assigned.
This amendment is submitted to amend the following:		·15*
. If amending name, enter the new name of the limited	l liability company here:	•
	Y II, LLC	
he new name must be distinguishable and contain the words "Limited	Liability Company," the designati	on "LLC" or the abbreviation "L.L.C."
Inter new principal offices address, if applicable:	3	
Principal office address MUST BR A STREET ADDRES	SS)	
Enter new mailing address, if applicable:		•
Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BOX		
		records, enter the name of the n
Mailing address MAX BR A POST OFFICE BOX) 3. If amending the registered agent and/or register existered agent and/or the new registered office address Name of New Registered Agent:	s here:	records, enter the name of the n
Mulling address MAY BE A POST OFFICE BOX) 3. If amending the registered agent and/or registered agent and/or registered office address	s here:	
Mulling address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or register existered agent and/or the new registered office address Name of New Registered Agent:	s here:	

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 performan : 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

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<i>1</i> 28		

MGR = Manager

14:41 Deloach & Hofstra

(FAX)727 393 5418

P.003/004

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FACIMILE AUDIT NO.: H180000801613

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person, being added or removed from our records:

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record specifies a delayed s	iffective date, but not	an effective time, at 12	::D1 a.m. on the earlier of
The 90th day after the recon	d is filed.		
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