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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LAW OFFICE OF CONRAD WILLKOMM, P.A.

Account Number : I20200000174 Phone : (239)262-5303

Fax Number

: (239)262-6030

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

Email Address:__

conrad@swfloridalaw.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN FINN GROUP, LLC

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Helm. LEMIEUX

JUN 2 3 2023

COVER LETTER

	istration Sc ision of Cor			
Aun in CT.	Finn Group			
SUBJECT:			ited Liability Company	 ::
The enclosed	l Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return	all correspo	ndence concerning this matter	to the following:	
		Conrad Willkomm, Esq.		
		,	Name of Person	
		Law Office of Conrad Wil	Ikomm, P.A.	
			Firm/Campany	
		320) Tamiami Trail N, 2n	d Floor	
			Address	
		Naples, FL 34103		
		e y market o de de la companya de la	City/State and Zip Code	
		conrad@swfloridalaw.com	to be used for future annual report notification)	
For further in	nformation c	oncerning this matter, please c		
Conrad Will			239 262-5303	
		l' Person	at ()	e Number
Enclosed is a	check for the	ne following amount:		
≘ \$ 25.00 F	filing Fee	□ \$30,00 Filing Fee & Certificate of Status	Certified Copy	\$60.00 Filing Fee, Certificate of Status & Certifica Copy (additional copy is enclosed)
	iling Addres		Street Address:	
	gistration S	Section fornorations	Registration Section Division of Corporation	ıs

Division of Corporation P.O. Box 6327 Tallahassee, FL 32314

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

· Fax: 12392626030

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Finn Group, LLC					
(Name of the Limited	Liability Company Florido Limited Lad	n <u>y it now appears op o</u> ulity Company)	ur recurds)		
The Articles of Organization for this Limited Liabi Florida document number L18000141168		ere filed on <u>06/07/20</u>	18	and assi	gned
This amendment is submitted to amend the following	ing:				
A. If amending name, enter the new name of th	e limited liabilit	y company here:			
The new name must be distinguishable and contain the words	s "Limited Liability	Company," the designal	ion "LLC" or the at	phreviation "L.I	. C."
Enter new principal offices address, if applicable	le; .				
(Principal office address MUST BE A STREET)	(DDRESS)				
	-				
Enter new mailing address, if applicable:					
(Mailing address MAY BE A POST OFFICE BO	<u>w</u> .	<u></u>	<u> </u>		
B. If amending the registered agent and/or registered office address h	ere:	iress on our record	`_ ;`	ne of the new	
Name of New Registered Agent:	Law (Office of Conrad	Willkomm, P.	۱. ري	
New Registered Office Address:	3201 7	amiami Trail N 2		 ია	
		Enter Florida stri	et uldress	_	
	Naples	Ciry	, Florida	34103	
		City	,	Zip Code	
New Registered Agent's Signature, if changing Regi	istered Agent:		•	53	
I hereby accept the appointment as registered a provisions of all statutes relative to the proper accept the obligations of my position as register	and complete pe	rformance of my di	ities, and I am j	familiar with	and

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

From: Conrad Williams						

. Fax: 12392626030

To: 8506176383@rctax.com Fax: (850) 617-6383

Page: 4 of 6

06/22/2023 2:41 PM

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	CYRIAC JOSEPH	5209 HARVEST HILL DRIVE	□ Add
		JAMES VILLE,NY 13078	
			□Change
		W-10-10-10-10-10-10-10-10-10-10-10-10-10-	□ Add
			□Remove
			□Change
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-Fax: 12392526030

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Note:	If the date inse	her than the date ed, the date must be s erted in this block o date on the Depart	loes not meet	the applicabl	date of filing or le statutory fil	more than 90 daing requiremen	(optional) ys after filing.) Pursi its, this date will r	rant to 605,0207 (3 not be listed as th
e recor rd is fil		elayed offective dat	ė, but not an	effective time	c, st 12:01 a.m	, on the earlier	af: (b) The 901	n day after the
Dated	<u>June</u>	19	2	023	. •			
						ve of a member		

Typed or printed name of signee