118000209536

| (Re | questor's Name) | |
|-------------------------|-------------------|-------------|
| (Ad | dress) | |
| (Ad | dress) | |
| (Cit | y/State/Zip/Phone | : #) |
| PICK-UP | WAIT | MAIL |
| (Bu | siness Entity Nam | ne) |
| (Do | cument Number) | |
| Certified Copies | _ Certificates | of Status |
| Special Instructions to | Filing Officer: | |
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Office Use Only



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COVER LETTER

| TO: Registration S Division of Co | | | | | |
|--------------------------------------|---|---|----------------------|--|-------|
| FATSHN' | VESTING LLC | | | | |
| SUBJECT: | Name of Lim | ited Liability Company | | | |
| | Amendment and fee(s) are sub | - | | | |
| | Souad Mansour | | | | |
| | FATSI INVESTING LLC | Name of Person | | | |
| | 9214 Knights Branch Stree | Firm/Company | | DEC . | |
| | Tampa FL 33637 | Address | | 7 7 | FILED |
| | fatsillc@gmail.com | City/State and Zip Code | | - c. | |
| For further information of | E-mail address: (concerning this matter, please c | to be used for future annual all: | report notification) | | |
| Souad Mansour | | 813 748 | 89771 | | |
| Name (| of Person | Area Code | Daytime Telepho | one Number | |
| Enclused is a check for t | the following amount: | | | | |
| S25.00 Filing Fee | ☐ \$30.00 Filing Fee & Certificate of Status | ☐ \$55.00 Filing Fee & Certified Copy (additional copy is enc | | \$60.00 Filing fice, Certificate of Statu Certified Copy (additional copy is encl | |
| МАН | ING ADDRESS: | STREET | T/COURIER ADD | ORESS: | |

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassec, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| EA | TOL | INV | CCT | INL | 1 1 | · |
|-------|-----|-------|------|------|-----|---|
| 17.71 | | TIN V | L.O. | 11.0 | | |

| (Name of the Limited | | | | | | on our | records.) |
|----------------------|---------|---------|-----------|-----|-------|--------|-----------|
| رد) | Florida | Limited | Liability | Con | many) | | |

| | (A Florida Limited I | Diability Company) | | |
|---|---|--|--|--|
| The Articles of Organization for this Limited I. Florida document number L18000209536 | | were filed on 08/31/2018 | and assigned | |
| This amendment is submitted to amend the fol | lowing: | | | |
| A. If amending name, enter the new name of | of the limited liab | ility company here: | | |
| The new name must be distinguishable and contain the | words "Limited Liabil | lity Company," the designation "LLC" or | the abbreviation "L.L.C." | |
| Enter new principal offices address, if appli- | cable: | 9214 Knights Branch Street Tampa | FI, 33637 | |
| (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: | | | | |
| | | 9214 Knights Branch Street Tampa FL 33637 | | |
| (Mailing address MAY BE A POST OFFICE | BOX) | | g g | |
| B. If amending the registered agent and registered agent and/or the new registered of | | | nter the name of the new | |
| Name of New Registered Agent: | | | | |
| New Registered Office Address: | 9214 knights B | ranch Street Enter Florida street address | | |
| | 21 | | 224.17 | |
| | Tampa | , Florid | a 2503/ Zip Code | |
| New Registered Agent's Signature, if changing | Registered Agent: | • | | |
| I hereby accept the appointment as registery provisions of all statutes relative to the propaccept the obligations of my position as registeng filed to merely reflect a change in the company has been notified in writing of this | per and complete istered agent as p registered office | performance of my duties, and I provided for in Chapter 605, F.S. | am familiar with and Or, if this document is | |

Page 1 of 3

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 = 1 Manager

AMBR = Authorized Member

| <u>Title</u> | <u>Name</u> | Address | Type of Action |
|--------------|---------------|--|----------------|
| AMBR | Souad Mansour | 9214 knights Branch Street Tampa FL 33637 | ⊒ Add |
| | | | □ Remove |
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| tive date, if other than the diffective date is listed, the date must be | be specific and cannot be prior t | o date of filing or more t | han 90 days after filing | .) Pursuant to | 605.0 |
| If the date inserted in this bloc ment's effective date on the Dep | | ble statutory filing rec | jurements, this date | will not be | listed |
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| ecord specifies a delayed of ecord specifies a delayed of the record of | effective date, but not rd is filed. | an effective time | e, at 12:01 a.m. | on the ea | arlier |
| 12/4/2018 | | | | | |
| d 12/4/2018 | | | | | |
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| | ignalure of a member or author | | | | _ |

Page 3 of 3

Filing Fee: \$25.00