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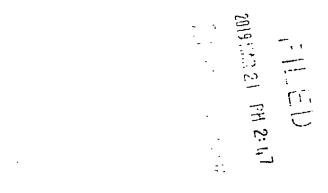
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COVER LETTER

TO:	Registration Secti Division of Corpo				
SUBJI	:CT:	FYC		ited Liability Company	
The en	closed Articles of An	nendment an	d fee(s) are sub	mitted for filing.	
Please	return all correspond	ence concerr	ing this matter	to the following:	
			THOMAS	5 S. 1-TEYWARD III. Name of Person	<u>-</u>
			FYC Ho	SLDINGS LLC Firm/Company	
			4267	48TH AVE SOUTH Address	
			Sr. Peter	RSBURG, FL 3371 City/State and Zip Code)
			HEYWAR E-mail address: (1	D4146 GMAIL. COM to be used for future annual report notifi	cation)
For fur	ther information con	cerning this	natter, please ca	alt:	
	HOMAS S. Name of Po		IRD III	at (727) 641 - 8 Area Code Daytime	739 Telephone Number
Enclos	ed is a check for the	following an	iount:		
□ \$2.	5.00 Filing Fee	□ \$30,00 F Certific	ling Fee & ate 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)

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

	200	Λ'
	TO	201.
ARTICL	ES OF ORGANIZATIO	N 1966 S. 13.
	OF	- 4/ May No
		Pi.
FYC Hour	bility Company as it now appears on orida Limited Liability Company)	ON 2019
(Name of the Limited Lia	bility Company as it now appears on	our records.)
(// 110	Tital Emitted Elability Company)	¹⁰ A
he Articles of Organization for this Limited Liabilit	y Company were filed on	1-28-2018 and assigned
Florida document number <u>L 18000 730 6</u>	.59	
	•	
This amendment is submitted to amend the following	; :	
1 If a manding name antenth a new name of the	ii	
A. If amending name, enter the new name of the	umited hability company here:	
he new name must be distinguishable and contain the words "	Limited Liability Company," the design	ation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
<u>Principal office address MUST BE A STREET AD</u>	DRESS)	
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX		
) If amounting the marietaned areas and and		
If amending the registered agent and/or registered agent and/or the new registered office a	gistered office address on our	r records, <u>enter the name of the n</u>
egistered agent and/or the new registered office a	igaress nere.	
Name of New Registered Agent:		
		-
New Registered Office Address:		
	Enter Florida si	reet address
		, Florida
	City	Zip Code

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

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	BRIAN STORMAN	9401 TREASURE LANE NE	⊠ Add
		ST. PETERSBURG, FL 33702	. □ Remove
			Change
			Remove
			Change
		-11	Add
			Remove
			Change
			_□ Add
			_□ Remove
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			☐ Change

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reffectiv <u>te:</u> If tl	date, if other than the date of filing: 3-19-2010 (optional) redate is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be seffective date on the Department of State's records.	
record he 90	I specifies a delayed effective date, but not an effective time, at $12\colon\!01$ a.m. on the ϵ th day after the record is filed.	earlier o
ed	3-19-2019	
	TITIME	
	Signature of a member or authorized representative of a member	

Page 3 of 3

Filing Fee: \$25.00