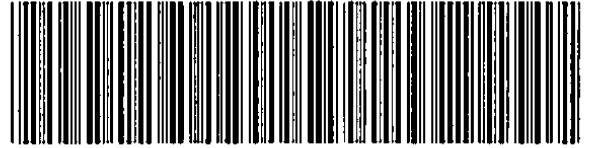


2190000 No 120



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(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: THE FIN INVESTING GROUP LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

ERNESTO FUENTES

Name of Person

THE FIN INVESTING GROUP LLC

Firm Company

27251 WESLEY CHAPEL BLVD. SUITE 105

Address

WESLEY CHAPEL, FL 33544

City/State and Zip Code

EFINVESTING@OUTLOOK.COM

E-mail address (to be used for future annual report notification)

For further information concerning this matter, please call:

ERNESTO FUENTES at (727) 688-7519
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the 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)

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**

THE FIN INVESTING GROUP LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 01/15/2019 and assigned Florida document number L19000016120.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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19 AUG 20 AM 11:49
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:


Name of New Registered Agent: ERNEST FUENTES

New Registered Office Address: 27251 WESLEY CHAPEL BLV. SUITE 105
Enter Florida street address

WESLEY CHAPEL, Florida 33544
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.


Ernest Fuentes
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>	<u>Address</u>	<u>Type of Action</u>
MGR	DANA M. EMBRY <i>Dana M Embry</i>	27251 WESLEY CHAPEL BLV. SUITE 105, WESLEY CHAPEL, FL 33544	<input type="checkbox"/> Add
		<i>Dana M Embry</i>	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	ERNEST FUENTES <i>Ernest Fuentes</i>	27251 WESLEY CHAPEL BLV. SUITE 105, WESLEY CHAPEL, FL. 33544	<input checked="" type="checkbox"/> Add
		<i>Ernest Fuentes</i>	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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 19 AUG 20 11 37
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
PLEASE CHANGE THE REGISTER AGENT'S NAME FROM Ernesto Fuentes to ERNEST FUENTES

**PLEASE CHANGE THE REGISTER AGENT'S NAME FROM: Ernesto Fuentes TO: ERNEST FUENTES

** ERNEST FUENTES IS THE SOLE PROPRIETOR OF "THE FIN INVESTING GROUP LLC"

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

August 15th 2019

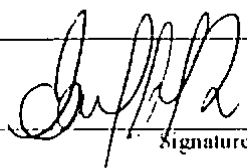
E. Effective date, if other than the date of filing: _____ (optional)

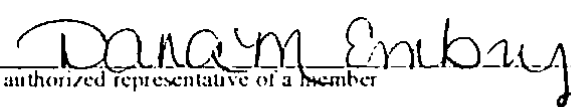
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:
(b) The 90th day after the record is filed.

Dated August 15th 2019

 _____
Signature of a member or authorized representative of a member

 _____

Ernest Fuentes

Dana M. Embry

Typed or printed name of signee