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TALL AHASSEE, FL

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COVER LETTER

TO: Registration Division of C						
	NI FINANCIAL GROUP LLC					
SUBJECT:	Name of Lim	ited Liability Company				
	of Amendment and fee(s) are sub	_				
Picase return all corre	spondence concerning this matter	to the following:				
	BRIAN FORBES					
		Name of Person				
		Firm/Company			2	
	1544 MISTFLOWER LN			IAL	022 J	er:
		Address		<u>구</u> . 全i	<u>∓</u> 2	425 (225
	WINTER GARDEN, FL.	34787		AHASSE	7 A	\$ ************************************
	BRIAN@FORLONLCOM	City/State and Zip Code	•	F S FA	2022 JUN 27 AHII: 2	C
	<u>~</u>	to be used for future annual report not	fication)	- -	12	
For further information	on concerning this matter, please c	all:				
BRIAN FORBES		240 2772081 at ()				
Nan	ne of Person		ne Telephone Nun	nber	<u> </u>	
Enclosed is a check for	or the following amount:					
■ \$25.00 Filing Fee	e ☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certi	0 Filing 1 ficate of fied Copy ional copy	Status & y	
P.O. Box 6	on Section f Corporations	Street Address: Registration Se Division of Co The Centre of 2415 N. Monro Tallahassee, FI	rporations Fallahassee oe Street, Suit	te 810		

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FORLONI FINANCIAL 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 $\frac{02/04/2019}{1}$ and assigned Florida document number 1.1900034036 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: FORBES FINANCIAL GROUP LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "L.L.C." 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) 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: New Registered Office Address: Enter Florida street address

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.

City

If Changing Registered Agent, Signature of New Registered Agent

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