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## **COVER LETTER**

TO:

Registration Section

Tallahassee, FL 32314

Div	ision of Cor	porations				
enn teze.		ers Investing LLC				
SUBJECT:		Name of Limit	ed Liability Company			
The enclosed	l Articles of	Amendment and fee(s) are subm	nitted for filing.			
Please return	all correspo	ondence concerning this matter to	the following:			
		Etoria Cummings				
			Name of Person	<u> </u>		
			Firm/Company			
		688 Shetland Dr.				
			Address			
		St. John's Fl. 32259				
			City/State and Zip Code			
		cummingsinvestors@gmail.c	om be used for future annual repo	ort notification)		
For further in	nformation c	oncerning this matter, please cal				
Etoria Cummings		207 <del>314-60</del> at ()	#II 214	4090		
	Name o	f Person	Area Code I	Daytime Teleph	one Number	
Enclosed is	a check for th	ne following amount:				
□ <b>\$</b> 25.00 I	Filing Fee	S30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy tadditional copy is enclosed		\$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)	
Re	iling Addres	Section	Street Addr Registratio	on Section		
Division of Corporations P.O. Box 6327			Division of Corporations The Centre of Tallahassee			

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

HEAVY HUTTERS INVESTING LLC		
( <u>Name of the Limited Liability Com</u> (A Florida Limite	npany as it now appears on our records. d Liability Company)	)
The Articles of Organization for this Limited Liability Company were filed on May 07.2019		and assigned
Florida document number 1.19000123598		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited li	ability company here:	
Opportunity Lane Investments LLC		
The new name must be distinguishable and contain the words "Limited Lia	ability Company," the designation "LLC"	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		- Su N
(Principal office address MUST BE A STREET ADDRESS)		
		₹ <b>2</b> m
		<u> </u>
Enter new mailing address, if applicable:		က်စ္က 👱 🔟
(Mailing address MAY BE A POST OFFICE BOX)	<del> </del>	10 % N
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		<u> </u>
B. If amending the registered agent and/or registered offic agent and/or the new registered office address here:	e address on our records, <u>enter tl</u>	he name of the new registered
Name of New Registered Agent:	· · · · · · · · · · · · · · · · · · ·	- <u>-</u>
New Registered Office Address:		
	Enter Florida street address	
	, Flor	rida
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agen	<u>ıt:</u>	

<u>N</u>

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, <u>enter the title, name, and address of each person\_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
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ective date, if other than the directive date is listed, the date must	be specific and o	cannot be prior t		more than 90 days			
te: If the date inserted in this blocument's effective date on the Dep			ble statutory fi	ling requirements	s, this date will no	ot be liste	d a
ecord specifies a delayed effective is filed.	date, but not a	in effective tin	ne. at 12:01 a.r	n, on the earlier o	of: (b) The 90th	day after	the
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