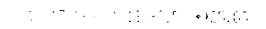
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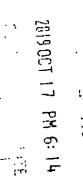
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COVER LETTER

TO: Registration Se Division of Con			
SUBJÉCT:	: F.C.C. (CASSLUTIAL GROUP	LLC
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	T	TIME BOTAS	•
,		Name of Person	
		Firm/Company	
	<u> </u>	BOTHNGUTORE BLVI)
	CO (FSTOU / FL 33326 City/State and Zip Code	
		City/State and Zip Code erestas 1930@hehme to be used for future annual report not	
For further information of	E-mail address: (concerning this matter, please ca		ification)
Jaime		at (<u>754</u>) <u>724</u> Area Code Daytin	· C 2 2 C ne Telephone Number
Enclosed is a check for t	he 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

TACO CONSLUTING		
(Name of the Limited Liability Col (A Florida Limit	mpany as it now appears on our records.) ted Liability Company)	
The Articles of Organization for this Limited Liability Compa	any were filed on <u>06/03/2019</u>	and assigned
Florida document number <u>L19000 146339</u> .		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited l	liability company here:	
FACO CONSULTING GROU	P LLC	
The new name must be distinguishable and contain the words "Limited L	iability Company," the designation "LLC" or the a	
Enter new principal offices address, if applicable:		· 9 - 7.5
(Principal office address MUST BE A STREET ADDRESS	0	<u> </u>
		P
		. <u>6</u>
Enter new mailing address, if applicable:		<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)		<u> </u>
B. If amending the registered agent and/or registered registered agent and/or the new registered office address l		the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
·		Zip Code
New Registered Agent's Signature, if changing Registered Age	City	Zīp Coae
ives republican Auril China in 1997 in Chanding Republican Aur	27 B B B	

If Changing Registered Agent, Signature of New 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 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
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
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			D ∧dd
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Filing Fee: \$25.00