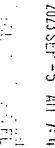
L20000150117

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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•	•	COVER LETTER	_		
TO: Registration Se		•	•		
	LDINGS LLC				
SUBJECT:	Name of Lim	ited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
	JOSEPH FUCHS				
	 	Name of Person			
		Firm/Company			
	247 176th Avenue East				
	Address Redington Shores, FL 33708 City/State and Zip Code				
	Evfuchs@gmail.com	to be used for future annual report no	tification		
For further information c	oncerning this matter, please ca	·	in the state of th		
Joseph Fuchs		813 242-6000 at ()			
Name o	f Person	Area Code Dayti	me Telephone Number		
Enclosed is a check for the	ne following amount:				
□ \$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
Mailing Address		Street Address:	ection		
Registration Section Division of Corporations		Registration S Division of Co			
P.O. Box 632	-	The Centre of Tallahassee			
Tallahassee, 1	FL 32314	2415 N. Monroe Street, Suite 810			

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FOXY HOLDINGS 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 $_^{\text{JUNE 2, 2020}}$ Florida document number ______L20000150117 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) 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

· 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>	Type of Action
AMBR _	EVA FUCHS	247 176th Avenue East	= Add
		Redington Shores, FL 33708	□Remove
			□Change
			□Add
		, <u></u>	Remove
			□Change
			□Add
			Remove
			□Change
			□Add
			□Remove
			Change
			□Add
			Remove

•	•
-	
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an ei lote:	date, if other than the date of filing:
reco I is f	pecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
atec	8/30/23
	Signature of Linember or authorized representative of a member
	JOSEPH FUCHS

Filing Fee: \$25.00