## 120000150875

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## **COVER LETTER**

TO: Registration Section

Division of Corporations			
2 Foggin (	Guys, LLC		
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspondent	ondence concerning this matter	to the following:	
	Judy Karniewicz, Esq.		
		Name of Person	
	The Karniewicz Law Grou	ир	
	<del></del> :	Firm/Company	<del></del>
	3834 W Humphrey St.		
		Address	<del></del>
	Tampa, FL 33614		
		City/State and Zip Code	· · · · · · · · · · · · · · · · · · ·
	Liza@tklg.net		
	E-mail address: (	to be used for future annual report not	itication)
For further information of	concerning this matter, please c	all:	
Judy Karniewicz, Esq.		813 962-0747	
Name o	of Person		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 Addre Registration Division of C P.O. Box 632 Tallahassee,	Section Corporations 27	Street Address: Registration Se Division of Co The Centre of 7 2415 N. Monro	rporations

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2 Foggin Guys, LLC		
(Name of the Lim)	ted Liability Company as it now appea (A Florida Limited Liability Company)	ars on our records.)
he Articles of Organization for this Limited L lorida document number L20000150875	iability Company were filed on	and assigned
nis amendment is submitted to amend the following	lowing:	
. If amending name, enter the new name o	of the limited liability company h	ere:
e new name must be distinguishable and contain the	words "Limited Liability Company," the	designation "LLC" or the abbreviation "L.L.C."
nter new principal offices address, if appli	cable:	· · · · · · · · · · · · · · · · · · ·
Principal office address MUST BE A STREI	ET ADDRESS)	
	<u> </u>	- 5
nter new mailing address, if applicable:		5
Calling address MAY BE A POST OFFICE	BOX	2
		<u> </u>
. If amending the registered agent and/or gent and/or the new registered office addre		records, enter the name of the new registe
Name of New Registered Agent:	Judy Kamiewicz, Esq.	
New Registered Office Address:	3834 W Humphrey St.	
	Enter Flo	orida street address
	Tampa	, Florida 33614
	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.

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	Membe

Title	<u>Name</u>	Address	Type of Action
			□Add
			Remove
			Change
			□Add
			□Remove
			Change
			□Add
			□Remove
		· · · · · · · · · · · · · · · · · · ·	□Change
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			□Remove
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lf amer	ding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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ਗਿਆ effe <u>Note:</u> I	re date, if other than the date of filing:
e record ed is file	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 d.
Dated _	6/25/2020, <u>2020</u>
	Signature of a member or authorized representative of a member
	Andrew Brown  Typed or printed name of signee

Programme and the second

Filing Fee: \$25.00