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	TO: Registration Section Division of Corporations
Please return all correspondence concerning this matter to the following: May Celin Tossy Name of Person	
May Ce In Tossy Name of Person Tassy Group westors LCC Firm/Company 135 5 6 5th we # 6 Address De Vacy Beach Cl 33483 City/State and Zip Code Tossy Group nyos forso Gmail. Com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: May Celin Tossy Name of Person at (561) 789 84 98 Daytime Telephone Number Enclosed is a check for the following amount: \$\times \times 255.00 Filing Fee & Gentificate of Status Certificate of Status Certificate Opy Certificate of Status Certificate Opy Certificate of Status Certificate Copy	The enclosed Articles of Amendment and fee(s) are submitted for filing.
Tassy Group westors LCC Firm/Company 135 SE 5th W # 6 Address Delraey Beach C 33483 City/State and Zip Code Tassy Group News forso Gmail. com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Marcelin Tassy at (561) 789 84 88 Name of Person at (561) Daytime Telephone Number Enclosed is a check for the following amount: \$\times \times \ti	Please return all correspondence concerning this matter to the following:
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Delvaey Beach CC 33483 City/State and Zip Code Tossy Groubin vos tors O Gmail. Com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Marcolin Tossy at (561) 789 84 98 Name of Person Area Code Daytime Telephone Number Enclosed is a check for the following amount: X \$25.00 Filing Fee Status Certificate of Status Certificate of Status Certificate of Status 8	
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For further information concerning this matter, please call: Marcelia	Delvaey Beach CC 33483 City/State and Zip Code
Marie of Person at (561) 789 84 98 Name of Person Area Code Daytime Telephone Number Enclosed is a check for the following amount: ★\$25.00 Filing Fee Certificate of Status Certificate Opy Topic Status Area Code Daytime Telephone Number \$60.00 Filing Fee. Certificate of Status 8	Tossy Groupinvos torso Gmail. com E-mail address: (to be used for future annual report notification)
Name of Person Area Code Daytime Telephone Number Enclosed is a check for the following amount: \$\frac{1}{2}\$	
\$25.00 Filing Fee Solution Status Solution Sta	
Certificate of Status Certified Copy Certificate of Status &	Enclosed is a check for the following amount:

Mailing Address:
Registration Section
Division of Corporations
P.O. Box 6327 Tallahassee, FL 32314

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

TOSSY Grou	Pinvestors LLC &
(<u>Name of the Limited Li</u> (A Fl	ability Company as it now appears on our records.)
The Articles of Organization for this Limited Liabili Florida document number L 2000/86	
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 "L.L.C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
Principal office address MUST BE A STREET AL	DDRESS)
Enter new mailing address, if applicable:	
Mailing address MAY BE A POST OFFICE BOX	2
B. If amending the registered agent and/or regist agent and/or the new registered office address he	ered office address on our records, <u>enter the name of the new registered</u> :
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
-	, Florida
	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 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
AMBR	Morcelin Tossy	135 SE 5th HYE H 6 Delvay B.	137483 [WAdd
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			🗆 Add
			□Remove
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an effective <u>lote:</u> If the	date is listed, to date inserte	the date must be	specific and does not n	I cannot be pr neet the app	ior to date of fil licable statute	ing or more than	(option 90 days after file rements, this d	ling.) Pursuant to 6 late will not be li	05.0207 sted as
record spe- is filed.	cifies a delay	ed effective d	ate, but not	an effective	: time, at 12:0	l a.m. on the c	arlier of: (b)	The 90th day af	ter the
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