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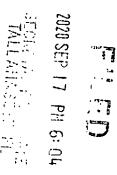
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## **COVER LETTER**

TO: Registration So Division of Con				
	h Companies, LLC			
SUBJECT:	Name of Lim	ited Liability Company	<del></del>	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	Jeffrey A White			
		Name of Person		
		Firm/Company		
	926 29th Street N	, ,		
		Address		
	St. Petersburg, FL 33713			
	jeffocy@gmail.com	City/State and Zip Code		
	E-mail address: (	to be used for future annual report notif	leation)	
For further information of	concerning this matter, please c	all:	ن 177	20,
Jeffrey A White		813 335-0274	ALC:	2020 SEP 17
Name	of Person	at () Area Code Daytime	Telephone Number	<del>-</del> 5
vanie	71 (480)	Area Code 17ayılını	Telephone Number	刊 平 7
Enclosed is a check for t	he following amount:		**************************************	ق ع
■ \$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 State Certified Copy (additional copy is enc	9 us &

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

White Fisch Companies, LLC		
( <u>Name of the Limited Liability (</u> A Florida Li	Company as it now appears on our records.) imited Liability Company)	
The Articles of Organization for this Limited Liability Con Florida document number	mpany were filed on	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	d liability company here:	
The new name must be distinguishable and contain the words "Limited	d Liability Company," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	<u></u>	
(Principal office address MUST BE A STREET ADDRES	SS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
		202
		AS B
B. If amending the registered agent and/or registered o	office address on our records, <u>enter the</u>	name of the new registere
agent and/or the new registered office address here:		7
		3 3 2
Name of New Registered Agent:		
New Registered Office Address:		31.1. 110
New Registered Office Hadress.	Enter Florida street address	
	, Florid	a
	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>Name</u>	<u>Address</u>	Type of Action
Jenna M White	926 29th Street N St. Petersburg, FL 33713	<del>-</del>
		□ Add
	···	□Remove
		Change
Jeffrey A White	926 29th Street N St. Petersburg, FL 33713	Change
		<b>=</b> Add
		□Remove
		Bremove
		Change
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		Jeffrey A White  926 29th Street N St. Petersburg, FL 33713  Jeffrey A White  926 29th Street N St. Petersburg, FL 33713

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ecord specifies a delayed effective is filed.	date, but no	ot an effectiv	e time, at	12:01 a.n	n, on the ea	arlier of: (b)	The 90th	day afte	er th
September 12 ted		2020							
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Jenna 1	$\rightarrow$	,							