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S. YOUNG

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: FUNDAMENTAL COUNSEL, LLC Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
BRADLEY JOLHUM Name of Person
FUNDAMENTAL COUNSEL; LLC
8 EAST YALE STREET Address
ORLANDO FL 32804 City/State and Zip Code BS YOCHUM @ GMAIL COM E-mail address: (to be used for future annual report notification)
BS YOCHUM @ GMAIL COM E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
BRADLEY OCHUM at (678) 522 7940 Name/of Person Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\Bigcup \text{\$30.00 Filing Fee & Certificate of Status}\$\$ Certificate of Status \$\Bigcup \text{\$55.00 Filing Fee & Certificate of Status & Certificate of Status & Certified Copy (additional copy is enclosed)}\$\$\$ Certified Copy (additional copy is enclosed)

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

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FUNDAMENTA (Name of the Limited Liability Co (A Florida Lim	L COUNSE	EL, LLC 3	ا ا جنسین
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The Articles of Organization for this Limited Liability Comp	ci 1 571	OTEMBOD 21,200	20:11
The Articles of Organization for this Limited Liability Comp	any were filed on	and ass ب	igned
Florida document number <u>L2000029.5</u> .4	1d=4.	- -)
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited			
FUNDAMENTAL (The new name must be distinguishable and contain the words "Limited I	LOUNSEL.	PLLC	
The new name must be distinguishable and contain the words "Limited I	Liability Company," the design	nation "LLC" or the abbreviation "L.	L.C."
Enter new principal offices address, if applicable:			
Principal office address MUST BE A STREET ADDRESS	<u> </u>		
Enter new mailing address, if applicable:		11.5.11	
Mailing address MAY BE A POST OFFICE BOX)			
			
B. If amending the registered agent and/or registered off	fice address on our recor	rds, enter the name of the nev	v registered
agent and/or the new registered office address here:			
Name of New Registered Agent:		· · · · · · · · · · · · · · · · · · ·	
New Registered Office Address:			
	Enter Florida s	areet address	
	City	, Florida Zip Code	
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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	Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
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Filing Fee: \$25.00