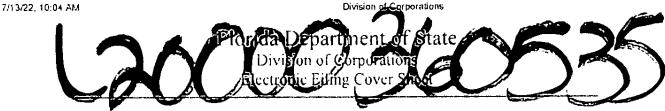
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Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H220002380143)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : TAXLEAF.COM INC Account Number : I20140000084 : (305)541-3980 Phone Fax Number : (786)713-1940

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:___

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Help

H22000238014 3

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

FPR GROUP L	LC
(Name of the Limited Liability Company as it (A Florida Limited Liability	now appears on our records.) Company)
The Articles of Organization for this Limited Liability Company were Florida document numberL20000360535	filed on FLORIDA and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability of	ompany here:
The new name must be distinguishable and contain the words. Limited Liability Con	mpany," 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 addreagent and/or the new registered office address here:	ss on our records, enter the name of the new registered
Name of New Registered Agent:	ا ا
	8: <u>- </u>
New Registered Office Address:	Enter Florida street address Florida
	ny Service Code
New Registered Agent's Signature, if changing Registered Agent:	11. 11. 10.2
I hereby accept the appointment as registered agent and agree to provisions of all statutes relative to the proper and complete performance the obligations of my position as registered agent as provided to merely reflect a change in the registered office addressing thus been notified in writing of this change.	ormance of my chities, and I am familiar with and led for in Chapter 605, F.S. Or, if this document is

If Changing Registered Agent, Signature of New Registered Agent

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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>	Name	Address	Type of Action
AMBR	AGUSTIN DIEGO ABELION	5537 SHELDON RD, SUITE E	⊒ Add
		TAMPA, FL 33615	□Remove
			TChange
			□Remove
			
			Remove
]Chunge
			IRemove
]Change
			JAdd
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Page: 5 of 5 2022-07-18 21:25:54 GMT 17867131940

H22000238014 3

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