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PICK-UP	☐ WAIT	MAIL
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COVER LETTER

Division of Corporations
SUBJECT: Fatboi Promotions and Entertainment UC 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:
Jamal Cadet Name of Person
Finn/Company
6511 NOVA DVIVE #234
Davie, Fl 33317 City/State and Zip Code
Caclet Jamas & Yamoo and report notification)
For further information concerning this matter, please call:
Natacha Thermitus at (786) 489-3600 Name of Person at (786) Daytime Telephone Number
Enclosed is a check for the following amount:
□ \$25.00 Filing Fee Certificate of Status Certificate of Status Certified Copy (additional copy is enclosed) □ \$55.00 Filing Fee & □ \$60.00 Filing Fee. Certified Copy (additional copy is enclosed)

Mailing Address:

TO:

Registration Section

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

Fatosi Promotions and Entertainment UC

(Name of the Limited Liability Company as it now appears on our records.)

(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company	were filed on 12 09-2020	and assigned	
Florida document number <u>L20000 38 4449</u>			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ility company here:		
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the abb	reviation "L.L,C,"	
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)		021	
		<u> </u>	
		7	
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)		75	
		<u> </u>	
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, enter the name	of the new registered	
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street address Florida		
	Ciţv	Zip Code	
Mr. D. Con. J. A. C. M. Blanck on Make and a Dept. second Appears			

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 Type of Action **Address** <u>Title</u> <u>Name</u> GRIMB Jamal Caclet MBR Natacha Thermitus \square Add □Remove Change **□**Rепюче □Change \square Add Remove Change Change

Effective date, if other than the date of filing: (optional) (an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 60 Note: If the date inserted in this block does not neer the applicable statutory filing requirements, this date will not be listed to the date on the Department of State's records. The record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after distribution of the state of th				
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Signature of a member or authorized representative of a member	Hatala Hunty	Galerian de la company de la c	ntative of a member	· · · · · ·