L21000026378

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COVER LETTER

TO: Registration S Division of Co	
SUBJECT:	Fish Consulting Group LLC Name of Limited Liability Company
The enclosed Articles of	Amendment and fee(s) are submitted for filing.
Please return all correspondence	ondence concerning this matter to the following:
	Alex Boytan, CPA Name of Person
	Boytan & Associates, LLP Firm/Company
	800 Cross Pointe Rd Ste B Address
	Gahanna OH 43230 City/State and Zip Code
	Boytan (a) Boytan wa. com E-mail address: (to be used for future abnual report notification)
For further information co	oncerning this matter, please call:
Alex Name of	Person at 614 947-0888 Area Code Daytime Telephone Number
inclosed is a check for the	following amount:
	S30.00 Filing Fee & S55.00 Filing Fee & S60.00 Filing Fee, Certificate of Status Certified Copy 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

FIL.ED 2023 SEP -5 AH 7:29

Fish Consulting (Name of the United Liability Compan (A Florida Limited Limite	Group LLC SECRETAL OF STATE (V as It now appears on our records.)
The Articles of Organization for this Limited Liability Company	vere filed on and assigned
Florida document number L 21000026378	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabil	
The new name must be distinguishable and contain the words "Limited Liability	
The new name must be distinguishable and contain the words "Limited Liability	y Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	N/A
(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 ad- agent and/or the new registered office address here:	
Name of New Registered Agent: 019a	Slirnyak
New Registered Office Address: 17901 Co	Enter Florida street address
Sunny 1s	cles Beach Florida 33160
New Revistered Agent's Signature of changing Dantes and	- wife Come

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 = M $AMBR = A$	lanager Authorized Member		
Title	Name	<u>Address</u>	Type of Action
Mar	Gabi Flish	1990 NE 163-d St Ste 102	
		North Miami Beach, FL 3316	2 KRcmove
			□Change
MGR	Olga Slirnyak	17901 Collins Ave Apt 250	3_ / (Add
	·	Sunny Isles Beach, FL 331	60 Remove
			Change
AMBR	Mariya Manzon	16047 Collins Ave, Apt 1203) ZAdd
		Sunny Isles Beach FL 33160	□Remove
			DChange
			□Add
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Filing Fee: \$25.00



August 16, 2023

ALEX BOYTAN, CPA 800 CROSS POINTE RD STE B GAHANNA, OH 43230

SUBJECT: FISH CONSULTING GROUP LLC

Ref. Number: L21000026378

We have received your document for FISH CONSULTING GROUP LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a FLORIDA PROFIT CORPORATION, but your entity is a FLORIDA LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Anissa Butler Regulatory Specialist II

SEP 05 ZZZZ

Letter Number: 323A00018797

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