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(Re	equestor's Name)	
(Ad	idress)	
(Ac	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	usiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

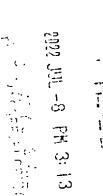
Office Use Only

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COVER LETTER

TO: Registration So Division of Cor			
FIS O'Town	ı LLC		
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Scott Anderson		
		Name of Person	
	FIS Partners LLC		20
		Firm/Company	
	8965 Conroy Windermre I	Rd	<u></u>
		Address	
	Orlando, FL 32835		PH 3: 13
		City/State and Zip Code	; ω
	scott@fineinkstudios.com		
For further information c	E-mail address: (oncerning this matter, please c	to be used for future annual report no	tification)
Scott Anderson		407 448-6250	
Name o	f Person	Area Code Daytin	ne Telephone Number
Enclosed is a check for the	he following amount:		
□ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address		Street Address:	ection
Registration S Division of C		Registration So Division of Co	
P.O. Box 632	27	The Centre of	Tallahassee
Tallahassee,	FL 32314	2415 N. Monro	oe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FIS OTown LLC				
(Name of the Limited Liabilit (A Florida	y Company as it now appears on our record Limited Liability Company)	<u>ds.</u>)		
ne Articles of Organization for this Limited Liability Company were filed on 6/10/21 orida document number L21000271656		and assigned		
his amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limi	ted liability company here:			
he new name must be distinguishable and contain the words "Lim	ited Liability Company," the designation "LLC	O" or the abbreviation "L.L.C."		
Inter new principal offices address, if applicable:		~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~		
Principal office address MUST BE A STREET ADDR	ESS)	<u> </u>		
		P III		
nter new mailing address, if applicable:				
Mailing address MAY BE A POST OFFICE BOX)		; co		
 If amending the registered agent and/or registered gent and/or the new registered office address here: 	l office address on our records, <u>enter</u>	the name of the new register		
Name of New Registered Agent:				
New Registered Office Address:	Enter Florida street addre	55		
	, Fl	lorida		

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>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	DOUBLE REBELLION LLC	13506 SUMMERPORT VILLAGE PKW	= Add
		#339	□Remove
		WINDERMERE, FL 34786	□ Change
AMBR	SECOND BORN ENTERPRISES I	1818 HENLEY STREET	□Add
		SAINT CLOUD, FL 34771	≣Remove
			□Change
			□ Add
			Remove
		·	Add C
			□ Add
			□Remove
			□Change
			□ Add
			□Remove
			☐ Change

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E. Effective date, if of (If an effective date is lis Note: If the date ins document's effective	ted, the date must be erted in this block	specific and canno does not meet th	t be prior to date of f e applicable statu	filing or more than 9 tory filing require	(optional) Odays after filing.) ments, this date v	Pursuant to 605 will not be list	5.0207 ed as
If the record specifies a d record is filed.	elayed effective da	ite, but not an eff	ective time, at 12:	:01 a.m. on the ca	rlier of: (b) The	90th day afte	r the
June 24			<u> </u>				
Dated		 ,					
Dated			A suphosized	esentative of a mem	hor		

EU: E GAZO