L2200050298

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COVER LETTER

TO: Registration So Division of Cor			
	f& Co. LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	emitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Shana Conti		
•		Name of Person	•
	Fiddle Leaf & Co. ししこ		
		Firm/Company	
	130 SW 33rd Ave.		
		Address	
	Cape Coral, FL 33991		
		City/State and Zip Code	
	Fiddleleafbooks@gmail.com	m	
	E-mail address: (to be used for future annual report notification)	
For further information of	concerning this matter, please c	all:	
Shana Conti		239 443-9665 at ()	
Name o	of Person	Area Code Daytime Telephone Nu	mber
Enclosed is a check for t	he following amount:		
□ \$25.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	Certified Copy Cert (additional copy is enclosed) Certi	00 Filing Fee, ificate of Status & ified Copy tional copy is enclosed)
<u>Mailing Addre</u> Registration		Street Address: Registration Section	
Division of C		Division of Corporations	
P.O. Box 632	27	The Centre of Tallahassee	
Tallahassee,	FL 32314	2415 N. Monroe Street, Sui	te 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

Fiddle Leaf & Co. LLC

2022 FEB 28 PM 12: 43

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

The Articles of Organization for this Limited L	iability Compa	any were filed on 01/28/20	and assigned
Florida document number L22000050298	·		
This amendment is submitted to amend the foll	owing:		
A. If amending name, enter the new name of	f the limited l	iability company here:	
N/A			
The new name must be distinguishable and contain the	vords "Limited L	iability Company," the designa	tion "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applie	able:	N/A	
(Principal office address MUST BE A STREE		2	
Enter new mailing address, if applicable:		N/A	
(Mailing address MAY BE A POST OFFICE BOX)		<u> </u>	
Indiang day ess MAT DE ATOST OTTICE	<u>вод</u>		
B. If amending the registered agent and/or agent and/or the new registered office addre	~	ce address on our record	s, enter the name of the new registered
Name of New Registered Agent:	N/A		
New Registered Office Address:			
		Enter Florida str	eet address
			, Florida
		Сну	Zip Code

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	Shana Conti	130 SW 33rd Ave.	□Add
		Cape Coral, FL 33991	□Remove
		Change from MGR to AMBR	
MGR	John Conti Jr.	130 SW 33rd Ave.	□Add
		Cape Coral, FL 33991	
		Change from AMBR to MGR	■Change
			□Add
			□Remove
			□ Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			Change
			□Remove

Applied them. Shana Conti is	supposed to be the AMBR a	and John Conti Jr., is the	MGR.	
				
			· ·	
				<u> </u>
		·		
				<u></u>
				
				
tive date, if other than the offective date is listed, the date must. If the date inserted in this bloment's effective date on the De	be specific and cannot be prior ck does not meet the applica	to date of filing or more than able statutory filing requi	(optional) 190 days after filing.) Pursuan rements, this date will not	t to 605.0 be list e d
ord specifies a delayed effective filed.	date, but not an effective ti	me, at 12:01 a.m. on the	earlier of: (b) The 90th da	ay after 1
February 21	. 2022			
Q	a 1			