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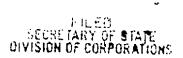
DIVISION OF CORPORATIONS
22 MAR 28 PH 3 1.6

T. MATTHEWS APR 11 2022

COVER LETTER

то:	Registration Sec Division of Corp					
end ie		ADVISEMENT GROUP		•	,	
SUBJE	CI:	Name of Lim	ited Liability Company			
The enc	losed Articles of a	Amendment and fee(s) are sub	mitted for filing.			
Please r	eturn all correspoi	ndence concerning this matter	to the following:			
		WENDY LAFORTUNE				
			Name of Person			
			Firm/Company			
		1115 NE 156 ST				
		MIAMI, FL 33162	Address			
			City/State and Zip Code			
		WENDYLAFORTUNE01@	•			
		E-mail address: (to be used for future annual	report notific	ation)	
For furt	her information co	oncerning this matter, please ca	all:			
WEND	Y LAFORTUNE		954 955 at ()	5-9408		
	Name of	Person	Area Code	Daytime T	Felephone Number	
Enclose	d is a check for th	e following amount:				
■ \$25	.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enc		Certified	e of Status &
	Mailing Address Registration S Division of Co P.O. Box 632 Tallahassee, F	ection orporations 7	Division The Cen 2415 N	ation Secti n of Corpo ntre of Tal	orations Hahassee Street, Suite 8	10

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



FOREIGN ADVISEMENT GROUP

22 MAR 28 PM 3 16

(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 $\frac{03/02/20}{}$	22 and assigned		
Florida document number L2200107544				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liab	e words "Limited Liability Company." the designation "LLC" or the abbreviation "L.L.C." licable: EET ADDRESS) TE BOX) r registered office address on our records, enter the name of the new registered			
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designa	tion "LLC" or the abbreviation "L.L.C."		
Enter new principal offices address, if applicable:	1115 NE 156 ST MIA	MI, FL 33162		
(Principal office address MUST BE A STREET ADDRESS)				
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE BOX)	<u> </u>			
	-	 -		
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our record	ls, enter the name of the new registered		
Name of New Registered Agent:				
New Registered Office Address:				
	Enter Florida street address			
		, Florida Zip Code		
	City	Zip Code		
New Registered Agent's Signature, if changing Registered Agent:				
I hereby accept the appointment as registered agent and agr	ee to act in this capac	city. I further agree to comply with the		

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
MGR	Wendy Lafortune	1115 NE 156 St North Miami Beach, Fl 33162	
			□Remove
		.	□Change
			□Add
			□Remove
			□Change
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an effective lote: If the	date is listed, th date inserted	than the date date must be in this block on the Depar	specific and does not n	l cannot be p neet the app	rior to date olicable sta	of filing or m			ig.) Pursuant to	
record spec l is filed.	rifics a delaye	d effective da	te, but not	an effectiv	e time, at	12:01 a.m.	on the earlie	er of: (b)	Fhe 90th day	after the
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