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2022 JUN -1 PM 3: 40
SECNETARY OF STATE
SECNETARY OF STATE

COVER LETTER

TO:

Tallahassee, FL 32314

TO: Registration Division of	n Section Corporations	`	
FMLAI	RGO HOLDINGS, LLC	•	•
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles	s of Amendment and fee(s) are sub	mitted for filing.	
Please return all corre	espondence concerning this matter	to the following:	
	Sydney Oudi		
		Name of Person	
	Mayhugh Commercial Ma	nagement, LLC	
		Firm/Company	
	13690 Eagle Ridge Dr.		
		Address	
	Fort Myers, FL 33912		
	lounis.engid@gmail.com	City/State and Zip Code	
For further information	E-mail address: (on concerning this matter, please c	to be used for future annual report not all:	iffication)
Sydney Oudi		239 278-4945	
Nan	ne of Person	at () Area Code Daytin	ne Telephone Number
Enclosed is a check fo	or the following amount:		
■ \$25.00 Filing Fee	e ☐ \$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)
<u>Mailing Ade</u> Registratio		Street Address: Registration Se	etion
Division o	f Corporations	Division of Co	
P.O. Box 6	5327	The Centre of	Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2022 JUN - 1 PM 3: 40

FMLARGO HOLDINGS, LLC

LDINGS, LLC

SECRETARY OF STATE

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

(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Completion of Complete Liability	pany were filed on April	22, 2022 and assign	ed
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited	liability company here:		
The new name most be distinguishable and contain the words "Limited	Liability Company," the desig	mation "LLC" or the abbreviation "L.L.C.	
Enter new principal offices address, if applicable:			 -
(Principal office address MUST BE A STREET ADDRES.			
Enter new mailing address, if applicable:	<u>-</u>		
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered of agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address:	fice address on our reco	rds, <u>enter the name of the new re</u>	gistered
New Registered Office Address.	Enter Florida	street address	
		, Florida Zip Code	
	City	Zip Code	
New Registered Agent's Signature, if changing Registered As	<u>gent:</u>		
I hereby accept the appointment as registered agent and provisions of all statutes relative to the proper and compacter the obligations of my position as registered agent being filed to merely reflect a change in the registered of company has been notified in writing of this change.	olete performance of my t as provided for in Cha	duties, and I am familiar with a pter 605, F.S. Or, if this docume	nd

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 = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Jeffrey Poirier	1439 Rose Garden Rd.	□Add
		Cape Coral, F1, 33914	■Remove
			□Change
			□Remove
			Change
			Remove
			☐ Change
			□Add
		Remove	
			Change
			
			□Remove
			Change
			□Add
			□Remove
			□ Change

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Effective date, if other than						(optional)		
If an effective date is listed, the date Note: If the date inserted in thi document's effective date on the	s block does	not meet t	he applicabl					
ne record specifies a delayed effeord is filed.	ctive date, b	ut not an c	ffective time	, at 12:01 a.m.	on the earlier	of: (b) The	: 90th day afte	er the
Dated May 31		20	122					
)	•				
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	Signatur	e of a me mb	ici oi autiloliz	eu represemany	e or a member			

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Filing Fee: \$25.00