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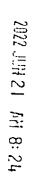
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COVER LETTER

TO:	Registration Se Division of Cor						
SUBJE		pital Holdings					
SUBJE	CI:	Name of Limited Liability Company					
		Amendment and fee(s) are sub	_				
Please n	eturn all correspo	ondence concerning this matter	to the following:				
		Erick Fenelus					
		Name of Person					
		Fenelus Capital Holdings LLC					
		Firm/Company					
		13760 Cedar Bluff Ct					
		Address					
		Davie/FL/33325					
		City/State and Zip Code erickfenelus@me.com					
		E-mail address: (to be used for future annual report notification)					
For furth	her information c	concerning this matter, please c	all:				
Erick Fo	enelus		954 663-3705				
	Name o	f Person	Area Code Daytii	me Telephone Number			
Enclose	d is a check for th	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 Addres	<u>ss:</u>	Street Address:				

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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

FENELUS CAPITAL HOLDINGS LLC

2022 JUN 21 AM 8: 24

(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 May 20, 2022 and assigned Florida document number 1.22000236330 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 must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." Enter new principal offices address, if applicable: (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 address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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.

City

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>	<u>Address</u>	Type of Action
MGR	Sarah Olsen	13760 Cedar Bluff Ct Davie FL 33325	□Add
			■Remove
			☐ Change
MGR	Erick Fenelus	13760 Cedar Bluff Ct Davie FL 33325	■Add
			□Remove
			□Change
			□Add
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ffecti [.]	ve date, if other than the date of filing:(optional)
an effe l ote:	ctive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.020 if the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a nt's effective date on the Department of State's records.
record Lis file	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the d.
ated _	une 15, 2022 , 12:41 pm.
	Signature of a member or authorized representative of a member
	•
	Erick Fenelus