L22000414405

(Re	questor's Name)	
(Add	dress)	
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TO:

Registration Section

Divis	sion of Cor	porations			
	Financial H	oldings of Florida			
SUBJECT: _		Name of Lim	ited Liability Company		
The analysis	Amint so see	Am and mand for day are such	naire of the Clinia		
		Amendment and fee(s) are sub	_		
Please return a	all correspo	indence concerning this matter	to the following:		
		Mark Moncher			
			Name of Person		•
		Financial Holdings of Flor	ida LLC		
			Firm/Company		,
		625 Highland Ave. suite 2			
			Address		
		orlando florida 32801			2022 HOY -
		mmu@mail.com	City/State and Zip Code		
			to be used for future annual report noti	(ication)	P
For further in	formation c	oncerning this matter, please c	all:		131 - 13 131 - 131
Mark Monche	er		813 4953101 at ()		i in o
	Name o	f Person	Area Code Daytim	e Telephone Number	
Enclosed is a	check for th	ne following amount:			
≡ \$25.00 Fi	iling Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	te of Status &
	ling Addres		<u>Street Address:</u> Registration Se	ction	
Division of Corporations		Division of Cor	Division of Corporations		
	. Box 632 ahassee, l		The Centre of T 2415 N. Monro	allahassee e Street, Suite 8	10

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

Financial Holdings of Florida LLC (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 Sept 22, 2022 and assigned Florida document number 1.22000414405 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 "LLC." 625 Highland Ave Enter new principal offices address, if applicable: Suite 2 (Principal office address MUST BE A STREET ADDRESS) Orlando Fl 32801 625 Highland Ave suite 2 Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) Orlando fl 32801 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: Mark Moncher Name of New Registered Agent: 625 Highland Ave suiter 2

New Registered Agent's Signature, if changing Registered Agent:

New Registered Office Address:

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

orlando

If Changing Registered Agent, Signature of New Registered Agent

Enter Florida street address

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
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Dated 11/02/2022							
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Typed or printed name of signee