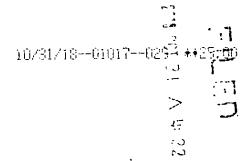


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(Re	questor's Name)	
(Ad	dress)	
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PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only





COVER LETTER

TO: Registration S Division of Co			
FUND TH	E WEST, LLC		
SUBJECT:	Name of Line	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	HENRY TARRIO		
		Name of Person	esa 4
	FUND THE WEST,LLC		. 7 - 4
		Firm/Company	•
	5730 NW 2ND ST		>
		Address	v.
	MIAMI, FL, 33126		; 3 ; 3
	FUNDTHEWEST@GMAI	City/State and Zip Code L.COM	
	E⊣nail address: (to be used for future annual report noti	fication)
For further information	concerning this matter, please c	all:	
HENRY TARRIO		305 766-8213	
Name	of Person		e Telephone Number
Enclosed is a check for t	the 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)
Regist Divisi	ING ADDRESS: tration Section on of Corporations	STREET/COURI Registration Section Division of Corpor	on
P.O. E	Box 6327	Clifton Building	

2661 Executive Center Circle Tallahassee, Fl. 32301

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FUND THE WEST, LLC		
(<u>Name of the Limited Liabili</u> (A Florid	ity Company as it now appears on our records.) a Limited Liability Company)	
Fine Articles of Organization for this Limited Liability C	Company were filed on 10/23/2018	and assigned
Torida document number L18000248819	·	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	nited liability company here:	- >
he new name must be distinguishable and contain the words "Lin	nited Liability Company," the designation "LLC" o	r the abbreviation "L.I., C."
Enter new principal offices address, if applicable:		- (-)
Principal office address MUST BE A STREET ADD	RESS)	(<
Timespain office and cas in Our Berry St. Man.		<u> </u>
		,3 ,3
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
3. If amending the registered agent and/or regis	•	enter the name of the
egistered agent and/or the new registered office add	lress here:	
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
		da
	City	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 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
CEO .	HENRY TARRIO	5730 NW 2ND ST	
			■ Add
•		MIAMI, FL, 33126	
		<u></u>	□ Remove
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`an effective date is l Note: If the date in	other than the date of fi listed, the date must be specific nserted in this block does no we date on the Department	ic and cannot be prior to date not meet the applicable st	of filing or more than 90 days.	optional) after filing.) Pursuant to 60, , this date will not be list	5.0207 ted as
	fies a delayed effective after the record is file		effective time, at 12:0	01 a.m. on the earli	er o
	r 30	<u>. 7018</u> .			

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00