

Florida Department of State

LO4000037186
Division of Corporations
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To: Division of Corporations
Fax Number : (850)617-6383

From: Account Name : BAKER & HOSTETLER LLP
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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: Kidurkin@bakerlaw.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
C & R LEASE, LLC

Certificate of Status	0
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22 JAN 21 PM 1:05

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: C & R Lease, LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Keith C. Durkin

Name of Person

Baker & Hostetler, LLP

Firm/Company

200 South Orange Avenue, Suite 2300

Address

Orlando, Florida 32801

City/State and Zip Code

kdurkin@bakerlaw.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Keith C. Durkin

407 649-4005

Name of Person

at ()

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

\$25.00 Filing Fee

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\$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

Mailing Address:

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

Street Address:

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

C & R Lease, 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 05/17/2004 and assigned Florida document number L04000037186

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

Florida

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>	<u>Type of Action</u>
MGR	Ginette Roberts	1125 Pinar Drive	<input checked="" type="checkbox"/> Add
		Orlando, Florida 32825	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	John Roberts	1125 Pinar Drive	<input type="checkbox"/> Add
		Orlando, Florida 32825	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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