## L13000011294

(Re	questor's Name)	
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(6)	(0)-1-77:(0)-	- 40
(Cit	y/State/Zip/Phone	∌#)
PICK-UP	☐ WAIT	MAIL
. (Bu	siness Entity Nan	ne)
(Do	cument Number)	
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> J. SAULSBERRY EXAMINER JAN **29** 2013

## **COVER LETTER** .

TO: Registration Division of C		
SUBJECT:	Ecrou, LLC	
SUBJECT:	Name of Limited Liability Company	
The enclosed Articles	of Amendment and fee(s) are submitted for filing.	
Please return all corres	spondence concerning this matter to the following:	
	Jorge R Gutierrez	•
	Name of Person	•
	Boyd & Jeneretta, P.A.	_
	Firm/Company	•
	801 Brickell Avenue Suite 1440	
	Address	. 20
	Miami, Florida 33131	7013 JAN 25
	City/State and Zip Code	
	jgutierrez@boyd-jenerette.com	المنطق المرابية
	E-mail address: (to be used for future annual report notification)	JAN 25 AM 8 30
For further information	on concerning this matter, please call:	<b>9</b>
Jorge Gut	tierrez 305,537-9111	
Nan	ne of Person Area Code & Daytime Telephone Number	er
Enclosed is a check for	or the following amount:	
\$25.00 Filing Fee	□\$30.00 Filing Fee & □\$55.00 Filing Fee & □\$60.00 F	iling Fee,

Certified Copy

(additional copy is enclosed)

MAILING ADDRESS:

Certificate of Status

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

## STREET/COURIER ADDRESS:

Certified Copy

Certificate of Status &

(additional copy is enclosed)

Registration Section **Division of Corporations** Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	u, LLC	
(Name of the Limited Liability Comp (A Florida Limited	any as it now appears on our recor Liability Company)	rds.)
The Articles of Organization for this Limited Liability Companies Florida document number L13000011294	ny were filed on 01/22/20	and assigned
Tiorida document municer		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	bility company here:	
Cayenne	Capital, LLC	
The new name must be distinguishable and end with the words "Lin"L.L.C."	nited Liability Company," the design	nation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		2
(Principal office address MUST BE A STREET ADDRESS)		
		25 厂
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		GP CP
		<b>3</b> 8
B. If amending the registered agent and/or registered or registered agent and/or the new registered office address he	office address on our records, ere:	enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida str	reet address
	·	rida
	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 608, 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 the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member				
<u>Name</u>	Address	Type of Action		
		Add		
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D. If amen	ding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	•
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 Dated	1/23 , 2013
	John Holling
	Signature of a member or authorized representative of a member
	Typed or printed name of signee

Filing Fee: \$25.00