## L20000005882

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(City/State/Zip/Phone #)
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## **COVER LETTER**

Registration Section

TO:

Divisi	on of Corp	orations			
		NCPT LLC		•	
SUBJECT: _	Name of Limited Liability Company				
The analogue A	minls of A	mendment and fee(s) are subt	nitted for filing		
Please return al	l correspon	dence concerning this matter t	to the following:		
		CAITLIN HOGAN		<u>.</u>	
		Name of Person			
		CAIT HOGAN CPT LLC			
		Firm/Company			
		1008 34TH AVE NORTH			
			Address		
	ST. PETERSBURG, FL 33704				
			City/State and Zip Code		
		caitmccoyy@gmail.com E-mail address: (	to be used for future annual report noti	fication)	
For further infe	ormation co	incerning this matter, please co	all:		
CATTLIN HO	GAN		941 301-1970 at ()		
·	Name of	Person	Area Code Daytim	e Telephone Number	
Enclosed is a c	heck for th	e following amount:			
☑ \$25.00 Fil	ing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy fadditional copy is enclosed)	□ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)	
Regi Divi P.O.	ing Address stration S sion of Co Box 632 ahassee, F	ection orporations 7	Street Address: Registration Se Division of Co The Centre of T 2415 N. Monro	rporations	

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CAITHOGANCPT LLC			
	ted Liability Compa	ny as it now appears on our records.) Liability Company)	<del></del>
	(A Fiorida Limited i	Clantiffy Company)	Q. Q.
The Articles of Organization for this Limited L	iability Company	were filed on 12/27/2019	and assigned
Florida document number L20000005882	<u></u> .		
This amendment is submitted to amend the foll	owing:		
A. If amending name, enter the new name o	f the limited liab	ility company here:	
CAIT HOGAN CPT LLC			
The new name must be distinguishable and contain the v	vords "Limited Liabi	lity Company," the designation "LLC" or the a	abbreviation "L.L.C."
Enter new principal offices address, if applic	able:	1008 34TH AVE NORTH	
(Principal office address MUST BE A STREET ADDRESS		ST. PETERSBURG, FL 33704	
Enter new mailing address, if applicable:		<u></u>	
(Mailing address MAY BE A POST OFFICE	BOX)		
B. If amending the registered agent and/or in agent and/or the new registered office addre		address on our records, <u>enter the nar</u>	ne of the new registered
Name of New Registered Agent:	CAITLIN HOO	JAN	
New Registered Office Address:	1008 34TH AV	'E NORTH	
		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

ST. PETERSBURG

If Changing Registered Agent, Signature of New Registered Agent

Florida 33704
Zip Code

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	CAITLIN HOGAN	1008 34TH AVE NORTH	<b>≣</b> Add
		ST. PETERSBURG, FL 33704	□Remove
		<del></del>	□Change
			□Add
			□Remove
			□Change
		<del></del>	
			□Remove
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			🗆 Add
			Remove
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		<del></del>	□Change
	<del></del>	· · · · · · · · · · · · · · · · · · ·	□Add
			□Remove
			□ Change

D. If amending any other information, enter c	change(s) here: (Attach additional sheets, if necessary.)
<del></del>	
<del></del>	<u> </u>
	· · · · · · · · · · · · · · · · · · ·
E. Effective date, if other than the date of filir (If an effective date is listed, the date must be specific ar Note: If the date inserted in this block does not document's effective date on the Department of	nd cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(to meet the applicable statutory filing requirements, this date will not be listed as the
If the record specifies a delayed effective date, but no record is filed.	ot an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated Hugust 2	2020.  a member or authorized representative of a member
Cut United Signature of	a member or authorized representative of a member
	Caitlin Hogan
· ·	Typed or printed name of signee

Filing Fee: \$25.00