

L25000291986

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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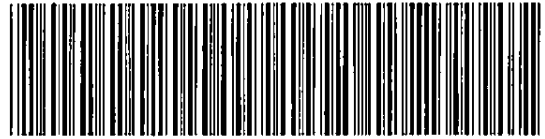
(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Cobblestone Technology Partners
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:

Marla Schaffer (Registered Agent)
Name of Person

Firm/Company

2352 Markingham Road
Address

Maitland, FL 32751
City/State and Zip Code

marlababy@yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Marla Schaffer at (321) 439-1065
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for 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)

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**

Cobblestone Technology Partners

(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 6/23/2025 and assigned Florida document number L25000291986

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Cobblestone Technology Partners, LLC

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

MGR = Manager
AMBR = Authorized Member

AMBR = Authorized Member

[illegible]

[illegible]

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated Aug 7, 2025

Maria Schaffer
Signature of a member or authorized representative of a member

Marla Schaffer, Registered Agent



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Detail by Entity Name

Florida Limited Liability Company

COBBLESTONE TECHNOLOGY PARTNERS

Filing Information

Document Number L25000291986

FE/EIN Number NONE

Date Filed 06/23/2025

Effective Date 06/23/2025

State FL

Status ACTIVE

Principal Address

55 LONG CIRCLE
ROSWELL, GA 30075

Mailing Address

55 LONG CIRCLE
ROSWELL, GA 30075

Registered Agent Name & Address

SCHAFER, MARLA
2352 MARKINGHAM ROAD
MAITLAND, FL 32751

Authorized Person(s) Detail

Name & Address

Title AMBR

KRAMER, JEFFREY
55 LONG CIRCLE
ROSWELL, GA 30075

Title AMBR

SCHAFER, CRAIG
2352 MARKINGHAM ROAD
MAITLAND, FL 32751

Title AMBR

CRANDALL, MARK
614 RICHMOND ST
ORLANDO, FL 32806

Annual Reports

No Annual Reports Filed

Document Images

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