12/13/2019



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name: MCLIN & BURNSED P.A.

352-751-4993

Account Number: 104657003604 : (352)753-4690 Phone Fax Number : (352)751-4993

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

ELLC AMND/RESTATE/CORRECT OR M/MG RESIGN RANEY COMPONENTS, LLC

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Tallahassee, FL 32314

Tallahassee, FL 32303

COVER LETTER

TO: Registration Sect Division of Corpa			
Raney Comp	onents, LLC		
SUBJECT:	Name of Limite	d Liability Company	
The enclosed Articles of A	mendment and fee(s) are subm	itted for filing.	
Please return all correspon	dence concerning this matter to	the following:	
	Sarah E. Uhrik, Esq.		
		Name of Person	
	McLin Burnsed		
		Firm/Company	
	1028 Lake Sumter Landing		
		Address	
	The Villages, FL 32162		
	- IVO II humand com	City/State and Zip Code	
	Sarahli@mclinburnsed.com E-mail address: (1	o be used for future annual report noti	fication)
For further information of	oncerning this matter, please ca	M:	
Sarah E. Uhrik, Esq.		352 259-501! at ()	
Name o	of Person	Area Code Daytin	te Telephone Number
Enclosed is a check for t	he following amount:		
■ \$25.00 Filing Fcc	☐ \$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 Addre		Street Address: Registration S	ection
	Corporations	Division of Co	orporations
P.O. Box 63 Tallahassee	27	The Centre of 2415 N. Monr	oe Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(A Florida Limited	nany as it now appears on pur record Liability Company)		
ne Articles of Organization for this Limited Liability Compa orida document number L06000041089			ssigned
nis amendment is submitted to amend the following:			
. If amending name, enter the new name of the limited li	ability company here:		
CR Family Components, LLC		C' a iba ahhrention	" I C."
CR Family Components, LLC the new name must be distinguishable and contain the words "Limited Linter new principal offices address, if applicable:	hability Company," the designation "Li	2.00 B	TI
<u>Principal office address MUST BE A STREET ADDRESS</u>	<u> </u>	SE SE	
Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BOX)	N/A	P 21 02.	
B. If amending the registered agent and/or registered off agent and/or the new registered office address here: Name of New Registered Agent: N/A	ice address on our records, ent	er the name of the	new regi
New Registered Office Address:	Enter Florida street ad	dress	-

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 amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR= M AMBR= A	anager uthorized Member		T
<u>Title</u>	Name	<u>Address</u>	Type of Action
			□Change
			□ Add
			□Remove
			□ Change
			□Add
			Remove
			Change
			□Add
			□ Change
			□Add
			□Remove
			□Change
			□Add
			Remove

_ DChange

	N/A
	_
~	(optional)
(If en	ctive date, if other than the date of filing: (optional) (flective date is listed, the date must be specific and connot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207
Not	. If the date inserted in this block does not meet the applicable statutory titing requirements the
doc	iment's effective date on the Department of State's records.
the re-	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b). The 90th day after the
cord is	
Dat	Signature of a member or authorized representative of a member
Uat	
	AHUIN
	Signature of a member or authorized representative of a member