

L06000107122

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H11000186437 3)))



H110001864373ABC+

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

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

From: Account Name : LAW OFFICES OF PAUL A. LESTER, P.A.
Account Number : I20110000058
Phone : (305) 350-5344
Fax Number : (305) 373-2294

FILED
11 JUL 21 AM 8:28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED

11 JUL 21 PM 12:24

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

Email Address: palesq@gmail.com

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
CAPSTONE CG, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

JUL-21-2011 THU 12:00 PM

FAX NO. 15

P. 02

COVER LETTER

**TO: Registration Section
Division of Corporations**

7((H110001864373)))

SUBJECT: Capstone CG, 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:

Paul A. Lester

Name of Person

Law Offices of Paul A. Lester, P.A.

Firm/Company

9150 So. Dadeland Blvd., Suite 1400

Address

Miami, FL 33156-7855

City/State and Zip Code

palesq@gmail.com

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

For further information concerning this matter, please call:

Name of Person _____ at (_____) _____
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/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

((H110601854873)))
11 JUL 21 AM 8:28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Capstone CG, 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 11/03/2006 and assigned
Florida document number L06000107122.

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 end with 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)

3800 S Tamiami Trl, Ste 308

Sarasota, FL 34277

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

P.O. Box 15293

Sarasota, FL 34277

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 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

JUL-21-2011 THU 12:00 PM

FAX NO.

P. 04

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:

(((HIT0001864373)))

MGR = Manager

MGRM = Managing Member

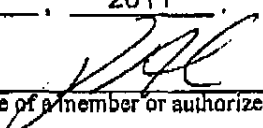
<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
<u>MGRM</u>	<u>Rogers, Shane</u>	<u>3800 S Tamiami Trl, Ste 308</u> <u>Sarasota, FL 34239</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
<u>Lodge</u>	<u>Ryan</u>	<u>15400 NW 34th Avenue</u> <u>Miami, FL 33054</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Update Shane Rogers info.

FILED
11 JUL 21 AM 8:28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Dated July 20, 2011


Signature of a member or authorized representative of a member

Paul A. Lester

Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00