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B. BOSTICK
DEC **29** 2011
EXAMINER

COVER LETTER
TO: Registration Section Division of Corporations
SUBJECT: C+C Enterprise PARTNEYS, 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:
Torris h. Cofer Name of Person
CA C Enterprise Partners, LL C
132/ N.W. 8/ Terr.
Miami, FL. 33147 City/State and Zip Code
towns & Cooper & Nothail. Com = E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Torris h. Copek at (305) 733-0560 To Area Code & Daytime Telephone Number
三 - 1 - 2 - 3 - 3 - 3 - 3 - 3 - 3 - 3 - 3
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\ S30.00 Filing Fee &

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

	rprise			.C		
(Name of the Limited Liabili	ity Company as it a Limited Liability	t now appears of y Company)	our records.)			
The Articles of Organization for this Limited Liability Florida document number	Company were	filed on Sep	tember 2	<u>07</u> a	nd assi	gned
This amendment is submitted to amend the following:						
A. If amending name, enter the new name of the lir	mited liability co	ompany here:				
The new name must be distinguishable and end with the w "L.L.C."	ords "Limited Lia	bility Company,	' the designation '	'LLC" c	or the ab	breviation
Enter new principal offices address, if applicable:				-44-2		
(Principal office address MUST BE A STREET ADD	DRESS)			E		
				2-2	05.	east back
				125	Γ\O	9 J.
Enter new mailing address, if applicable:				اندا: دين	~J	***
(Mailing address MAY BE A POST OFFICE BOX)			 	73.2		To Service
<u> </u>				32		Transport 1
				D m:	- 23	
B. If amending the registered agent and/or registered agent and/or the new registered office ad-		idress on our	records, enter	the na	me of	the new
Name of New Registered Agent:	<u></u>	 				
New Registered Office Address:		Park and	77			
	Enter Florida street address					
	~:		, Florida		<u> </u>	
	City			Zin	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 amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager variousa Masshor being added or removed from our records: MGR = Manager MGRM = Managing Member **Title Name Address Type of Action** Cynthia Y. Cooper 1302 N.W. Remove ☐ Add ☐ Remove Add Remove □Add ☐ Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) 19th December

rage 2 of 2

O RRIS

Filing Fee: \$25.00

Signature of a member or authorized representative of a member

Typed or printed name of signee