# 107000098856

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## **COVER LETTER**

Registration Section Division of Corporations

Tallahassee, FL 32314

TO:

SHRIECT.			SIGN, LLC	
SUBJECT.		Name of Lim	ited Liability Company	
The enclosed	Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return	all correspo	ondence concerning this matter	to the following:	
	Name of Limited Liability Company  seed Articles of Amendment and fee(s) are submitted for filing.  turn all correspondence concerning this matter to the following:    STEPHEN M SUAU			
For further info STEPHEN M  Enclosed is a c  \$25.00 Fil  Maili Regi Divis			Name of Person	
			Firm/Company	
		4420 YACHT CLUB DR		
			Address	
		VENICE, FL 34293		
			City/State and Zip Code	
			to be used for future annual report n	otification)
For further in	iformation c	oncerning this matter, please co	nll:	
STEPHEN N	4 SUAU			
	Name o	f Person	Area Code Days	ime Telephone Number
Enclosed is a	check for the	ne following amount:		
□ \$25.00 F	iling Fee		Certified Copy	Certificate of Status & Certified Copy
				Section
Division of Corporations		Division of C	orporations	
P.O. Box 6327		The Centre of	f Tallahassee	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

COLLABORATIVE COMMUNITY DESIGN, 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 SEPTEMBER 27, 2007 and assigned Florida document number L07000098856 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: CARBON-LIFE, LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." NO CHANGE Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) NO CHANGE 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: NO CHANGE Name of New Registered Agent: New Registered Office Address: 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.

If Changing Registered Agent, Signature of New Registered Agent

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>	Address	Type of Action
		NO CHANGE	□Add
			Remove
			Change
			□Remove
			☐Change ☐ ☐Add
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facti	e date, if other than the date of filing:		
n effe	rive 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	605.02
	If the date inserted in this block does not meet the applicable statutory filing requirements, this date vent's effective date on the Department of State's records.	vill not be	listed
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ecard	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The	Onth day	after t
is file		70th day	arci i
ted _	MARCH 5 2020		
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Filing Fee: \$25.00

Typed or printed name of signee