## L08000109962

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T. Burch NOV. 2.5. 2013



## COVER LETTER

TO: Registration Section **Division of Corporations** 

## CM MANAGEMENT & CONSULTING, 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:

Michael P. Gable

Name of Person

Law Office of Gable & Heidt

Firm/Company

4000 Hollywood Boulevard, 735 South Tower

Address

Hollywood, FL 33021-6755

City/State and Zip Code

michaelpgable@att.net

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

For further information concerning this matter, please call:

Michael P. Gable

at (954) 966-2501

Area Code & Daytime Telephone Number

Name of Person

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

(Name of the Limited Liability Comp (A Florida Limited	nany as it now appears or Liability Company)	Iting LLC our records.)
The Articles of Organization for this Limited Liability Compan Florida document number <u>L08000109962</u> .	ny were filed on Decer	mber 1, 2008 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	bility company here:	
The new name must be distinguishable and end with the words "Lin"L.L.C."	nited Liability Company,'	'the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	4000 Hollywood E	Boulevard, Suite 735 South Tower
(Principal office address MUST BE A STREET ADDRESS)	Hollywood, FL	33021-6755
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)		FILED  RETAR
B. If amending the registered agent and/or registered or registered agent and/or the new registered office address he		records, enter the name of the new
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

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:

MGR = Mana MGRM = Ma	ager nnaging Member		
<u>Title</u>	Name	<u>Address</u>	Type of Action
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	on, enter change(s) here: (Attach additional sheets, if necessary.)
. Please change address	of Christophe Leroy as Mgrm from 300 South Point Drive,
#3105, Miami Bead	ch, FL 33139 to 4000 Hollywood Boulevard,
Suite 735 South	Tower, Hollywood, FL 33021-6755
November 15	0040
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Dated November 15	
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Signa	ture of a member or authorized representative of a member
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Page 3 of 3

Filing Fee: \$25.00

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