## 11100033621

	equestor's Name)	
(176	equestor's Name)	
<u>'</u>		
(AC	ddress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bı	usiness Entity Nam	e)
(Dx	ocument Number)	
Certified Copies	Certificates	of Status
	_	,
<u> </u>		<del></del>
Special Instructions to	Filing Officer:	
		•

Office Use Only



300318401733

09/18/18--01007--001 \*\*385.00

N COOPER SEP 2 1 2018

## **COVER LETTER**

	tration Sec on of Corp			
SUBJECT: _	CF	FM&D, LLC		
SUBJECT		Name of Limi	ted Liability Company	
The enclosed A	Articles of a	Amendment and fee(s) are subt	nitted for filing.	
Please return al	ll correspo	ndence concerning this matter t	to the following:	
		Dean L. Willbur. Jr.		
			Name of Person	
		DEAN L. WILLBUR, JR.,	P.A.	
			Firm/Company	
		11380 Prosperity Farms	Road, Ste. 110A	
			Address	·
		Palm Beach Gardens, Fl	_ 33410	
		dean@deanlwlaw.com	City/State and Zip Code	
		E-mail address: (t	o be used for future annual report notific	cation)
For further info	ormation co	oncerning this matter, please ca	11:	
Dean L. Willb	ur, Jr.		561 775-7577	
	Name of	Person	Area Code Daytime	Telephone Number
Enclosed is a cl	heck for th	e following amount:		
■ \$25,00 Fili	ng 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:

TO:

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

CFM&D, LLC				
( <u>Name of the Limited Liability Cor</u> (A Florida Limi	mpany as it now appears on our records.) ited Liability Company)			
The Articles of Organization for this Limited Liability Compa	any were filed on March 21, 2011	and assigned		
Florida document number <u>L11000033621</u> .				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited l	liability company here:			
The new name must be distinguishable and contain the words "Limited L	.iability Company," the designation "LLC" or			
Enter new principal offices address, if applicable:		18 SE		
(Principal office address MUST BE A STREET ADDRESS	<u> </u>	R43S		
		<b>8</b> 787		
		<b>A</b> 주요년 유년		
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE BOX)		<u> </u>		
B. If amending the registered agent and/or registered registered agent and/or the new registered office address		nter the name of the ne		
registered agent and/or the new registered office address i	nere.			
Name of New Registered Agent:				
New Registered Office Address:				
	Enter Florida street address			
	, Florid	la Zip Code		
	City	Zip Code		
New Registered Agent's Signature, if changing Registered Age	ent:			
I hereby accept the appointment as registered agent and a provisions of all statutes relative to the proper and compl				
accept the obligations of my position as registered agent				

If Changing Registered Agent, Signature of New Registered Agent

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 = 'Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	James E. Allen	10 Woburn St. Lexington, MA 02420	Add
			■ Remove
			Change
MGR	Patrick T. Caine	349 Hope St. Providence, RI 02906	
			■ Remove
			Change
AMBR	Mystic Valley Management Inc.	2642 SE Willoughby Boulevard Stuart, FL 34994	
			Remove
		·	Change
			□ Add
			□ Remove
			Change
			Add
			Remove
			☐ Change
			Remove
			Change

						,	· · · · · · · · · · · · · · · · · · ·		•	
-					·	_	-			
			,					<del></del>		
		·			· •	<del>-</del>				
	·				<del></del>					<del></del>
									_	DIVISION SE
		<u></u> ;							<b>8</b>	15 <u>5</u> 0
									43S	물건 크린
									8	
	<u>-</u> .								<del> </del>	<u> </u>
									AH 10: 3	- 됐 <u>다.</u> - 건강
								, <u> </u>	ယ	
	<u>.</u>			·						
tive date,	if other than the is listed, the date mu	e date of fil	ling:			<del></del>	(opt	ional)		
Hective date : If the dat	is listed, the date mu e inserted in this b	ist be specific flock does no	and cann of meet 1	iot be prior to the applical	) date of film ble statutor	ig or more th v filing rea	an 90 days afte tirements, th	er filing.) Pu iis date wil	rsuant to I not be	605.0 listed
	ctive date on the D									,,,,,,,
cord spe	ecifies a delaye	d effective	e date	, but not	an effec	tive time,	at 12:01	a.m. on	the e	arlier
e 90th di	ay after the rec	cord is file	d.							
	0		_	2040						
J	9-13	<u> </u>	_ · _	2018	_ ·					
					~					
		Signatura	fa munch	/\ <u>a</u>	we	atativa of c	nember			_
		A STREET, ASSESSED BY		ici or autilioi	a cu represe	manist (II il I	KUUCI			

Page 3 of 3

Filing Fee: \$25.00