

L11000060262

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

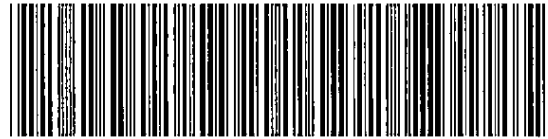
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



300420159483

12/11/23--01008--015 \*\*25.00

12/27/23 KH

2023 DEC 11 PM 12:30  
STATE  
CLERK

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** CF Thumbs Up 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:

Lauren Knowles

\_\_\_\_\_  
Name of Person

CF Thumbs Up LLC

\_\_\_\_\_  
Firm/Company

6824 S. Manhattan Ave

\_\_\_\_\_  
Address

Tampa, FL 33616

\_\_\_\_\_  
City/State and Zip Code

LaurenKnowles314@gmail.com

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

For further information concerning this matter, please call:

Lauren Knowles

203  
at ( )

506-2355

\_\_\_\_\_  
Name of Person

\_\_\_\_\_  
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 Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

2023 DEC 11 PM 12:30  
STATE  
CLERK

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

CF Thumbs Up 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 05/23/2011 and assigned  
Florida document number L11000060262.

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 contain 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)**

6824 S. Manhattan Ave

Unit 102

Tampa, FL 33616

**Enter new mailing address, if applicable:**

**(Mailing address MAY BE A POST OFFICE BOX)**

6824 S. Manhattan Ave

Unit 102

Tampa, FL 33616

**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:

Lauren Knowles

New Registered Office Address:

6824 S. Manhattan Ave

*Enter Florida street address*

Tampa

Florida

33616

*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 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>    | <u>Address</u>        | <u>Type of Action</u>                      |
|--------------|----------------|-----------------------|--|
| MGRM         | Jared Knowles  | 6824 S. Manhattan Ave | <input type="checkbox"/> Add               |
|              |                | Tampa, FL 33616       | <input checked="" type="checkbox"/> Remove |
|              |                |                       | <input type="checkbox"/> Change            |
| MGRM         | Lauren Knowles | 6824 S. Manhattan Ave | <input checked="" type="checkbox"/> Add    |
|              |                | Unit 102              | <input type="checkbox"/> Remove            |
|              |                | Tampa, FL 33616       | <input type="checkbox"/> Change            |
|              |                |                       | <input type="checkbox"/> Add               |
|              |                |                       | <input type="checkbox"/> Remove            |
|              |                |                       | <input type="checkbox"/> Change            |
|              |                |                       | <input type="checkbox"/> Add               |
|              |                |                       | <input type="checkbox"/> Remove            |
|              |                |                       | <input type="checkbox"/> Change            |
|              |                |                       | <input type="checkbox"/> Add               |
|              |                |                       | <input type="checkbox"/> Remove            |
|              |                |                       | <input type="checkbox"/> Change            |
|              |                |                       | <input type="checkbox"/> Add               |
|              |                |                       | <input type="checkbox"/> Remove            |
|              |                |                       | <input type="checkbox"/> Change            |

2023 DEC 11 PM 12:30  
STATE

(If an effective 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 605.0207 (3)(b)

**Filing Fee: \$25.00**