## 2110000 86917

(Requestor's Name)
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## COVER LETTER

CCPM IN SUBJECT:	VESTMENTS LLC			
	Name of Line	ited Liability Company		
The enclosed Articles of	f Amendment and fee(s) are sub	mitted for filing.		
Please return all corresp	ondence concerning this matter	to the following:		
	Ellie Halperin			
		Name of Person		
	Halperin Law Chartered			
	1601 Forum Place, Suite 5	00		
Address				
	West Palm Beach, FL 334	01		
City/State and Zip Code				
	ehalperin@halperin-law.com		ξ.	6.7
		to be used for future annual repo	ort notification)	2000 1447 ジン
For further information	concerning this matter, please co	all:	<u>.</u>	<u>}</u> =
Eleanor Halperin		561 478-4	722	47
Name of Person Area Code Daytime Telephone Number				
				~ ~ <b>~</b>
Enclosed is a check for t	the following amount:		7.	22
[ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclose	d) Certified	e of Status &

MAILING ADDRESS:

TO:

Registration Section Division of Corporations

> 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

CCPM INVESTMENTS LLC					
(Name of the Lim	ited Liability Compa (A Florida Limited	inv as it now appears Liability Company)	on our records.)		-
The Articles of Organization for this Limited I	Liability Company	were filed on 07/2	28/2011	and	assigned
Florida document number L110000086917	<del></del> .				
This amendment is submitted to amend the fol	lowing:				
A. If amending name, enter the new name of	of the limited liab	ility company her	<u>e</u> :		
he new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the des	ignation "LLC" or the a	abbreviation	"L.L.C."
Enter new principal offices address, if appli	cable:	263 Saratoga Blvd. E			
(Principal office address MUST BE A STREET ADDRESS)		Royal Palm Beach, FL 33411			
				_	_
Enter new mailing address, if applicable:		263 Saratoga Blv	d. E		
(Mailing address MAY BE A POST OFFICE BOX)		Royal Palm Beach, FL 33411			
3. If amending the registered agent and registered agent and/or the new registered of	l/or registered of	ffice address on o	our records, enter	the nam	ie of the r
		_	<i>‡.</i>	النال	771
Name of New Registered Agent:	Michael Cabot			<del>- :</del>	- Propries
New Registered Office Address:	263 Saratoga B			D	Т
			la street address	ċò	$\bigcirc$
	Royal Palm Be	ach	, Florida <sup>3</sup>	3 <b>ફ્રે</b> મુ	

## 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.

City

If Changing Registered Agent, Signature of New Registered Agent

Zip Code

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
AMBR	Palm Royal Capital LLC	263 Saratoga Blvd E	Add
		Royal Palm Beach, FL 33411	Remove
			Change
\MGR → <del>(</del>	Jack Coscia	631 US Highway 1, Suite 304	
		North Palm Beach, FL 33408	Remove
			Change
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			Add Remove
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.I ame	ending any other information, enter change(s) here: (Attach additional sheets, i	t necessary	<i>.</i> )	
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ffecti	ive date, if other than the date of filing:	(optional)	ά	O
Note:	fective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 day. If the date inserted in this block does not meet the applicable statutory filing requirement ent's effective date on the Department of State's records.	s atter_itting., is, this date	MPnot b	e listed as t
	cord specifies a delayed effective date, but not an effective time, at 12 and 90th day after the record is filed.	:01 a.m. (	on the e	earlier of
Dated	June 28 2018			
	- h / h min			
	Signature of a member or authorized representative of a member			_
	(Tak ( acris			
	bal acia			

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Filing Fee: \$25.00