## L11000104265

Office Use Only



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C. LEWIS

DEC 2 8 2011

EXAMINER

## **COVER LETTER**

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TO: Registration Sect Division of Corpo		Ÿ,	·		
4 4	<b>*</b> !				
SUBJECT: CF DEVEL	OPERS NETWORK, LLC	ted Liability Company			
	Name or Emil	ned Liability Company			
The enclosed Articles of A	mendment and fee(s) are sub	omitted for filing.			
Please return all correspond	dence concerning this matter	to the following:			
	Ricardob, Parente				
		Name of Person			
	CF7DEVELOPERSWNE	TWORK. LLC			
		Firm/Company			
	2477 Harbour Way				
		Address	1		
	Winter Park, Flo	rida 32792			
		City/State and Zip Code			
	rparente@cfdevel				
	E-mail address: (	to be used for future annual report notificat	tion)		
For further information cor	cerning this matter, please c	all:			
Diagrada Damanta		at (			
Ricardo Parente at (407) 212-7422  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	S55.00 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**

FILED

2011 DEC 27 AM 18: 14

CF DEVELOPERS NETWORK, LLC

SECREMARY OF STATE

(Name of the Limited Liability Company as it now appears on our records.) HASSEE. FLORIUA

(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability	Company were filed on Se	ptember 12, 2011 and assigned
Florida document number <u>L11000104265</u>	<u></u> .	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lin	mited liability company here	:
The new name must be distinguishable and end with the w "L.L.C."	ords "Limited Liability Compan	y," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADL	DRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered agent and/or the new registered office ad		ir records, <u>enter the name of the new</u>
Name of New Registered Agent:		
New Registered Office Address:	Ente	r Florida street address
		, Florida
	City	Zip Code
New Registered Agent's Signature, if changing Register	red 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 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 = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address .	Type of Action
MGRM	Ordely B. Parente	2477 Harbour Way	Add
		Winter Park, Florida 32792	Remove
MGRM	Ricardo Parente	2477 Harbour Way	Add
		Winter Park, Florida 32792	Remove
			. Add
			Remove
			Add
			Remove
			∏Add
***************************************			Remove
			∏Add
	<del>-</del>		Remove
D. If an	nending any other information, enter chang	re(s) here: (Attach additional sheets, if necessary) E-mail address as follows:	<b>20</b> 1
	Amend correspondence name and	E-mail address as follows:	F 1 2011 DEC
	Ricardo Parente	حر ان ان	EC 27
	rparente@cfdevelopers.net		office E
	THESE CHANGES SHALL TAKE EFFECT	T ! JANUARY 2012.	_
Dated	December 22 , 201	<u> </u>	
	Ordely B. Parente	r or authorized representative of a member	<u>, )</u>
	Ordely B. Parente	Ricardo Parente	/
	Typed	or printed name of signee	<del></del>

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Filing Fee: \$25.00