

L12000064707

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

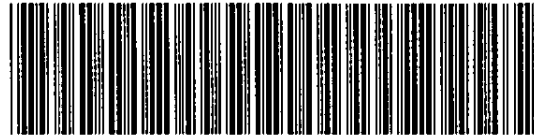
(Business Entity Name)

(Document Number)

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12 AUG 22 AM 11:16
SOLICITOR OF STATE
TALLAHASSEE, FLORIDA

K. SALY
EXAMINER

AUG 23 2012

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CBYF 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:

Cassie Berg
Name of Person
CBYF LLC
Firm/Company
1423 N Grandview Ave
Address
Daytona Beach FL 32118
City/State and Zip Code
Cberginc920@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Cassie Berg at (989) 714-1688
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/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

CBYF LLC

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on MAY 14, 2012 and assigned Florida document number L12000064707.

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 end with 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)

1423 N. Grandview Ave.
Daytona Beach FL 32118

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

2665 N Atlantic Ave
Ste # 304
Daytona Beach FL 32118

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:

Cassie Berg

New Registered Office Address:

1423 N. Grandview Ave

Enter Florida street address

Daytona Beach, Florida 32118

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.

Cassie Berg
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 = Manager

MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
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mGRM	Kendra Firmingham	2665 W. Atlantic Ave Ste 304 Daytona Beach FL 32118	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
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mGRM	John Carnes	2665 W. Atlantic Ave Ste 304 Daytona Beach FL 32118	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
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mGR	Cassie Berg	1423 N. Grandview Ave	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Dated 8-17-12

Cassie Berg

Signature of a member or authorized representative of a member

Cassie Berg

Typed or printed name of signee