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COVER LETTER

TÓ: Reg Div	gistration Sec vision of Corț	ction porations	. g. 3	
CLID IE CE		RICA, LLC		
SUBJECT:		Name of Lim	ited Liability Company	
The enclose	d Articles of A	Amendment and fee(s) are sub	mitted for filing.	
Please return	n all correspor	ndence concerning this matter	to the following:	
	CVM AMERICA, LLC Name of Limited Liability Company enclosed Articles of Amendment and fee(s) are submitted for filing. the return all correspondence concerning this matter to the following: WILLIAM C. VOIGHT II Name of Person VOIGHT, P.A. Firm/Company 7680 UNIVERSAL BLVD., SUITE 100 Address ORLANDO, FL 32819 City/State and Zip Code WILLIAM@MYVOIGHT.COM E-mail address: (to be used for future annual report notification) Further information concerning this matter, please call: LIAM C. VOIGHT II Name of Person Area Code Daytime Telephone Number S25.00 Filing Fee \$30.00 Filing Fee Certificate of Status Certificate Of Status & Certificed Copy Certificate of Status & Certificate Of Status Status & Certificate Of Status & Certificate Of Status			
			Name of Person	
		VOIGHT, P.A.		
			Firm/Company	
		7680 UNIVERSAL BLVI	D., SUITE 100	
			Address	
		ORLANDO, FL 32819		
			City/State and Zip Code	
		-		
		E-mail address: (to be used for future annual report notifi	cation)
For further i	information co	oncerning this matter, please c	all:	
WILLIAM	C. VOIGHT	<u> </u>	at ()	
	Name of	Person	Area Code Daytime	Telephone Number
Enclosed is	a check for th	e following amount:		
\$25.00	Filing Fee			

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

(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our record	ds.)
The Articles of Organization for this Limited Liability Company Clorida document number <u>L12000097358</u> .		
This amendment is submitted to amend the following:		
A. If amending name, <u>enter the new name of the limited liab</u>	ility company here:	
he new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC	C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
3. If amending the registered agent and/or registered or registered agent and/or the new registered office address her Name of New Registered Agent:		ls, enter the name of the
New Registered Office Address:		
	Enter Florida street addre, Fl	ss SHA TO
	City	C Zip Gode
New Registered Agent's Signature, if changing Registered Agent:	•	0.00

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 Mémber

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	GABRIEL MATRAVOLGYI	7680 UNIVERSAL BLVD #340	₽ Add
		ORLANDO, FL 32819	Remove
			Change
MGR	CASSIO A. VICENTIN	7680 UNIVERSAL BLVD #340	Add
		ORLANDO, FL 32819	☐ Remove
			☐ Change
			□ Add
			Remove
			☐ Change
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an effective date is listed, the date must be offer. If the date inserted in this block	be specific and cannot be	e prior to date of fi	ling or more than 90 ory filing requirer) days after filing.) ments this date w	Pursuant to	o 605.02 • listed
ocument's effective date on the Dep	partment of State's re-	cords.	ory ming roquirer	nonto, this date of		
e record specifies a delayed	effective date, bu	ut not an effe	ctive time, at	12:01 a.m. o	n the e	arlier
The 90th day after the reco	rd is filed.		,			
ated JULY 23	2015					
0/-	7/1					

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00