

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:	
	Division of Corporations
	Fax Number : (850)617-6383
From:	
	Account Name : ACCOUNT BOOKKEEPING CORP
	Account Number : 120120000055
	Phone : (407)898-1757
	Fax Number : (407)897-5336
*Enter ·	the email address for this business entity to be used for future
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Ema	ail Address: INFO @ ABK CORP. Com
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C.D.V. INVESTMENTS LLC Certificate of Status Certified Copy Page Count Page Count Pastimated Charge S25.00

Electronic Filing Menu Corporate Filing Menu

Help

	COVER LETTER
TO: Registration S Division of Co	Section Sections
	IVESTMENTS LLC
SUBJECT:	
The enclosed Articles of	f Amendment and fee(s) are submitted for filing.
Please return all corresp	condence concerning this matter to the following:
	JULIA TEDESCO
	Name of Person
	ACCOUNT BOOKKEEPING CORP
	Firm/Company .
	5301 CONROY RD SUITE 140
	Address
	ORLANDO, FL 32811
	City/State and Zip Code INFO@ABKCORP.COM
	E-mail address: (to be used for future annual report notification)
For further information c	concerning this matter, please call:
JULIA TEDESCO	407 898 1757 at ()
Name o	of Person Area Code Daytime Telephone Number
	the following amount:
Enclosed is a check for the	□ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee,
Enclosed is a check for th \$25.00 Filing Fee	Certificate of Status Certified Copy Certificate of Status & (additional copy is enclosed) Certified Copy (additional copy is enclosed)

Page: 4 03/29/2019 08:36 AM TO 18506176383 FROM: 5612934213 ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

C.D.V. INVESTMENTS LLC	
(Name of the Limited Liability Company (A Florida Limited Lin	/ as It now appears on our records.) ability Company)
The Articles of Organization for this Limited Liability Company w Florida document number <u>L13000035817</u>	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability	ity company here:
The new name must be distinguishable and contain the words "Limited Liability	y Company," the designation "LLC" or the abbreviation."LLC"
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)	

B. If amending the registered agent and/or registered office address on our records, <u>enter the name of the new</u> registered agent and/or the new registered office address here:

Name of New Registered Agent:	MARIA JOSE I. SAMPAIO		
New Registered Office Address:	5032 MATTEO TRAIL		
New Acelatered Onice Hudrows.	Enter Florida street address		
1	ORLANDO	, Florida <u>32839</u>	
	Cuy	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 Chailging Registered Agent, Signature of New Registered Agent

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If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person being added</u> or removed from our records:

MGR = Manager AMBR = Authorized Member

Title	Name	Address	Type of Action
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D. If smeading any other information, enter change(s) here: (Attach additional sheets, if recessory.)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

2619 MARCH 28 Duted Virthord And representative of th Sere MARIA JOSE LOLGON SAMPARO E LOUGON SAMPA (D.

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