#/13000/2489/

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ALLAHASSEE, FLORID.

K.SALY EXAMINER OCT -2 2013

COVER LETTER

TO: Regist

Registration Section
Division of Corporations

SUBJECT

CLO & COMPANY, 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:

CAROLINA A LOPEZ

Name of Person

Firm/Company

9120 SW 68TH ST

Address

MIAMI, FL 33173

City/State and Zip Code

CAROLOPEZ@BELLSOUTH.NET

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

CAROLINA A LOPEZ

305,9053654

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)

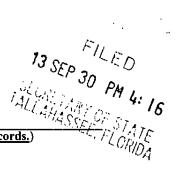
□\$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

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



CLO & COMPANY, LLC

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

The Articles of Organization for this Limited Liability Comp	pany were filed on 08/30/2013	and assigned
Florida document number L13000124891 .		·
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 "l".L.L.C."	Limited Liability Company," the designa	ation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS	<u> </u>	
	 	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered registered agent and/or the new registered office address	d office address on our records, g	enter the name of the new
Name of New Registered Agent:	 	···
New Registered Office Address:		
	Enter Florida stre	eet address
	, Flor	
	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.

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>	Name	Address	Type of Action
MGRM	CAROLINA A LOPEZ	9120 SW 68TH ST	✓ Add
		MIAMI, FL 33173	Remove
			_
			Add
			Remove
		•	Add
			Remove
			_
			Add
			Remove
			-
.			Add
			_ Remove
			Add
			Remove

SEPTEMBER 20 (2021/3)
(Noba)
Signature of a member or authorized representative of a member
Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00