

#13000170958

DEC/20/2013/FRI 11:58 AM Katz Baskies LLC
Division of Corporations

FAX No 561-910-5701

P. 001

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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To: Division of Corporations
Fax Number : (850)617-6383

From: Account Name : KATZ BASKIES LLC
Account Number : 120080000071
Phone : (561)910-5700
Fax Number : (561)910-5701

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
CAPITAL FINANCIAL PARTNERS ENTERPRISES, LLC

Certificate of Status	0
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COVER LETTER

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TO: Registration Section
Division of Corporations

SUBJECT: Capital Financial Partners Enterprises, 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:

Jeffrey Baskies

Name of Person

Katz Baskies LLC

Firm/Company

2255 Glades Road Suite 240W

Address

Boca Raton, FL 33431

City/State and Zip Code

jeff.baskies@katzbaskies.com

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

For further information concerning this matter, please call:

Jeffrey Baskies

Name of Person

at 561 910-5700

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

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

Capital Financial Partners Enterprises, 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 Company were filed on December 11, 2013 and assigned
Florida document number L13000170958.

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)

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, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

Florida

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 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>
MGRM	Will D. Allen	2325 SW 105th Terrace	<input type="checkbox"/> Add
		Davie, FL 33324	<input checked="" type="checkbox"/> Remove
MGR	Susan Daub	5879 NW 124th Way	<input checked="" type="checkbox"/> Add
		Coral Springs, FL 33076	<input type="checkbox"/> Remove
MGR	Will Allen	2325 SW 105th Terrace	<input checked="" type="checkbox"/> Add
		Davie, FL 33324	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Dated December 20, 2013.



Signature of a member or authorized representative of a member

Jeffery A. Baskies

Typed or printed name of signee

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Filing Fee: \$25.00