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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

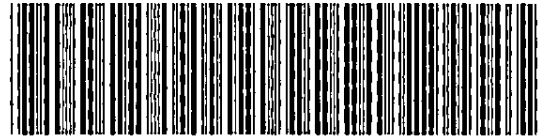
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2019 JAN -4 PM 1:03

n. BRUCE
JAN 12 2019

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CASFLAH, 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:

Christopher S. Flaherty

Name of Person

CASFLAH, LLC

Firm/Company

620 NW Dixie Highway, Suite 101

Address

Stuart, FL 34994

City/State and Zip Code

chris@fidlend.com

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

For further information concerning this matter, please call:

Christopher S. Flaherty

772
at ()

237-5211

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

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2019 JAN -4 PM 1:03

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

CASFLAH, 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 3/14/2014 and assigned
Florida document number L14000043157.

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 contain 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:

Christopher S. Flaherty

New Registered Office Address:

620 NW Dixie Highway, Suite 101

Enter Florida street address

Stuart

City

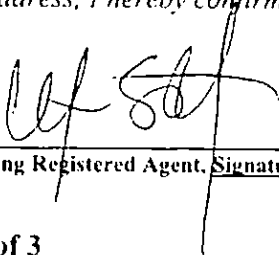
Florida

34994

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 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 Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	Stephanie A. Flaherty	620 NW Dixie Highway, Suite 101	<input type="checkbox"/> Add
		Stuart, FL 34994	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
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2009 JAN 4 PM 1:00
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FBI

2019 JAN - 4
ST-106
ST-106

FILED
2016 JAN -4 PM 1:03
CLERK OF DISTRICT COURT
JAN 4 2016
JAN 4 2016

E. Effective date, if other than the date of filing: _____ (optional)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated December 28 January 12 2019

Signature of a member or authorized representative of a member

Christopher S. Flaherty AND Stephanie A. Flaherty

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Filing Fee: \$25.00