L14 6000 73624

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COVER LETTER

	Registration Solvision of Col		·	
SUBJEC	C&C	Woodworking	, LLC	
SUBJEC	1.		ited Liability Company	
The exele	and Amiden of	Amondanant and Gode) are sub-	mitted for filing	
		Amendment and fee(s) are sub	-	
Please ret	urn all correspo	ondence concerning this matter	to the following:	
		Wanda Quill	linan	
			Name of Person	
		Douglas A. \	Wood, PA	
			Firm/Company	
		700 11th Str	reet South, Suite	102
			Address	
		Naples, FL 3	34102	
			City/State and Zip Code	
		welched@comca		
			to be used for future annual report notific	cation)
For furth	er information of	concerning this matter, please ca		
War	nda Qu	illinan	_{at (} 239 ₎ 263-77	7 40
	Name o	of Person	Area Code Daytime	Telephone Number
Enclosed	is a check for t	he following amount:		
© \$25.0	0 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

C&C Woodworking, LLC		
(<u>Name of the Limited Liah</u> (A Floric	llity Company as it now appears on our records.) da Limited Liability Company)	
The Articles of Organization for this Limited Liability Florida document number L14000073624	Company were filed on May 6, 2014	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lin	nited liability company here:	
The new name must be distinguishable and end with the words "I	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 ADD	DRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered agent and/or the new registered office ad		r the name of the new
Name of New Registered Agent:		70 -
New Registered Office Address:	Enter Florida street address	
	, Florida	Zip Code
New Registered Agent's Signature, if changing Register		3
I hereby accept the appointment as registered agen provisions of all statutes relative to the proper and accept the obligations of my position as registered a being filed to merely reflect a change in the register company has been notified in writing of this change	complete performance of my duties, and I am agent as provided for in Chapter 605, F.S. Or red office address, I hereby confirm that the l	familiar with and r, if this document is

If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Authorized Member on our records, <u>enter the title, name, and address of each Manager or Authorized Member being added or removed from our records</u>:

MGR = Manager

AMBR = Authorized Member **Title Address Type of Action** Name | Myles Strohl 168 Commercial Blvd **AMBR** □ Add Naples, FL 34104 **■** Remove Myles Strohl, Trustee 168 Commercial Blvd **AMBR** Add Naples, FL 34104 □ Remove □ Add □ Remove ☐ Add □ Add ☐ Remove

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	About About About Action Continue	
fective date, if of effective date must date this document	other than the date of filing: t be specific, cannot be prior to date of receipt or filed date and t is filed by the Florida Department of State)	(optional) I cannot be more than 90 days after
e date this documen	t is filed by the Florida Department of State)	(optional) I cannot be more than 90 days after
the date this documen	t be specific, cannot be prior to date of receipt or filed date and t is filed by the Florida Department of State) 2014	(optional) I cannot be more than 90 days after
he date this documen	t is filed by the Florida Department of State) 6 5 + 20 , 2014	
Dated	t is filed by the Florida Department of State) 2014 Signature of a member or authorized repre	
Dated	t is filed by the Florida Department of State) 6 5 + 20 , 2014	sentative of a member

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