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## COVER LETTER

	tration Sec ion of Corp		
	&C Proces	sing Services, LLC	
SUBJECT: _		Name c	ed Limited Liability Company
The enclosed A	Articles of a	Amendment and fee(s) ar	ar <b>e</b> submitted for filing.
Please return a	II correspoi	ndence concerning this n	matter to the following:
		Holly Carroll	
			Name of Person
		C&C Processing Serv	tvices, LLC
			Firm/Company
		448960 US Highway	y 301 
			Address
		Callahan, FL 32011	<u>                                     </u>
		holly@ccpspro.com	City/State and Zip Code
For further info	ormation co	ncerning this matter, ple	lease call:
Holly Carroll			904 333-9734 at ( )
Name of Person			Area Code Daytime Telephone Number
		e following amount:	
<b>■ \$</b> 25.00 Fili	ing Fee	S30.00 Filing Fee & Certificate of Stat	
	Registra Division P.O. Bo	NG ADDRESS: nion Section n of Corporations x 6327 ssee, FL 32314	STREET/COURIER ADDRESS: Registration Section Division of Corporations Cliffon Building 2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

C&C Processing Services, LLC		
( <u>Name of the Limited Liability Compan</u> (A Florida Limited Li	y as it now appears on our records.) ability Company)	
The Articles of Organization for this Limited Liability Company v Florida document number L14000166411	were filed on 10/24/2014	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabil	lity company here:	
The new name must be distinguishable and contain the words "Limited Liability".	ty Company," the designation "LLC" or the abbi	eviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		SEC 17
		ASS ASS 22
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		<u> မှာ</u> ႏှ
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here:		he name of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Florida	
New Registered Agent's Signature, if changing Registered Agent:	Сиу	Zip Code
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete paccept the obligations of my position as registered agent as probeing filed to merely reflect a change in the registered office a company has been notified in writing of this change.	performance of my duties, and I am fa rovided for in Chapter 605, F.S. Or, ij	miliar with and this document is

Page 1 of 3

If Changing Registered Agent, Signature of New Registered Agent

4GR = .	d from our records:		
itle	Authorized Member <u>Name</u>	Address	Type of Action
AGR	Douglas Bowes	250 Palm Coast Parkway NE	<u>,pc sc.,tc.,on</u>
		Suite 607 Box 106	<b>=</b> Add
		Palm Coast, FL 32137	☐ Remove
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reffecti te: If t	date, if other verdate is listed the date inser a seffective d	f, the date musted in this bl	a be specific ock does n	and c	annot be et the ap	prior to di oplicable	ite of filin statutory	s tiling te 8 ot mote	than 90 da quireme:	(option iys after fil its, this d	ing.) Pursua	int to 605,0 it be listed	120 1 as
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ed	Nov	/3	<i>N</i>	<u>.</u> .	_201	<u> 7</u> .							
	Nov <i>Klo</i> le	les to	UUM			<del></del>		· · · · ·		·· <b></b>			
		7	Signature o	f <b>a</b> lm	ember or	authorize	d represei	ntative of	i member				
	Holly Carro	oll, Managin	g Owner	<u> </u>	Typed or	printed na	ime of sig	nee	_			<del>_</del>	

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