

L 14000170758

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

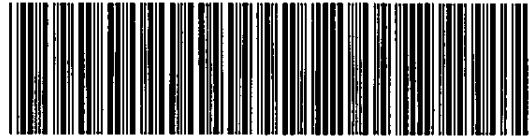
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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14 NOV 17 PM 4:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. Borch NOV 25 2014

CRAWFORD DEVELOPMENT LLC

4970 SW 72 AVE # 102

MIAMI, FL 33155

305.663.1122

Division of Corporations

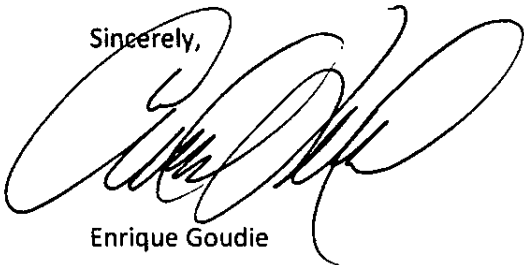
P.O.Box 6327

Tallahassee, FL 32314

Enclosed please find check # 89 for \$ 30.00 for changes to Crawford Development LLC.

Any questions please call our office or my cel.

Sincerely,

A large, stylized handwritten signature in black ink, appearing to read 'Enrique Goudie'.

Enrique Goudie

308.986.8505

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CRAWFORD DEVELOPMENT 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:

ENRIQUE GOUDIE
Name of Person
CRAWFORD DEVELOPMENT LLC
Firm/Company
4970 SW 72 AVE #102
Address
MIAMI, FLA. 33155
City/State and Zip Code
ENRIQUE@GREGANCONSTRUCTION.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ENRIQUE GOUDIE at (305) 663-1122
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**

CRANFORD DEVELOPMENT 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 11/03/2014 and assigned Florida document number L14000170758.

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 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 the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

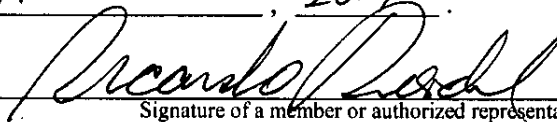
<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
<u>AMBR</u>	<u>ENRIQUE GOUDIE</u> ✓	<u>4970 SW 72 AVE #102, MIAMI, FL</u> <u>33155</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
<u>MGR</u>	<u>ENRIQUE GOUDIE</u> ✓	<u>4970 SW 72 AVE #102</u> <u>MIAMI, FLA 33155</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
<u>MGR</u>	<u>RICARDO R. RODA</u> ✓	<u>4970 SW 72 AVE #102</u> <u>MIAMI FL 33155</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
<u>AMBR</u>	<u>EDUARDO B. GOUDIE</u>	<u>4970 SW 72 AVE #102</u> <u>MIAMI FLA 33155</u>	<input checked="" 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.)

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

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated NOV. 14, 2014



Signature of a member or authorized representative of a member

RICARDO R. ROODA

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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TALLAHASSEE, FLORIDA