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COVER LETTER

Division of Co	orporations you Grande, LLC			
SUBJECT:				
The enclosed Articles o	f Amendment and fee(s) are sub	mitted for filing.		
Please return all corresp	condence concerning this matter	to the following:		
	Christopher Maher			
	CMM Bayou Grande, LLC	Name of Person		
	Firm/Company 6075 Bayou Grande Blvd.			
	St. Petersburg, Florida 337	Address 03		
	CMMaher3@gmail.com	City/State and Zip Code		
	E-mail address: (to be used for future annual report notif	fication)	
For further information	concerning this matter, please co	all:		
Christopher Maher		813 344-8924 at ()	e Telephone Number	
Name	of Person	Area Code Daytime	e Telephone Number	
Enclosed is a check for	the following amount:			
□ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status a Certified Copy (additional copy is enclose	

MAILING ADDRESS:

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Registration Section

TO:

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

CMM Bayou Grande, LLC				
(Name of the Limited I	iability Compa Iorida Limited	inv as it now appears o Liability Company)	n our records.)	
The Articles of Organization for this Limited Liabil Florida document number <u>L14000173822</u>	lity Company	were filed on Nove	mber 7, 2014	and assigned
This amendment is submitted to amend the following	ng:			
A. If amending name, enter the new name of the	limited liab	ility company here		
The new name must be distinguishable and contain the words	"Limited Liabil	ity Company " the design	nation "I I C" or the ol	, 23
Enter new principal offices address, if applicable		6075 Bayou Gran		OCT
(Principal office address MUST BE A STREET ADDRESS)		St. Petersburg, Fl	orida 33703	<u>်</u>
			· .	<u> </u>
Enter new mailing address, if applicable:				6: 07
(Mailing address MAY BE A POST OFFICE BO)	<u>V)</u>			
B. If amending the registered agent and/or registered agent and/or the new registered office	registered of address here	fice address on ou	ır records, <u>enter</u>	the name of the nev
Name of New Registered Agent:	hristopher M	aher		
New Registered Office Address: 6	075 Bayou G	rande Blvd.		
		Enter Florida .	street address	
<u>s</u>	t. Petersburg	,	, Florida ³³	703
		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 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>	Address	Type of Action
MGR	Michael Maher		
		3001 Alamo Dr. Orlando Florida	
		32805	■ Remove
	Christopher Maher	6075 Bayou Grande Blvd. St.	Change
MGR		Petersburg, Florida 33703	Add
			☐ Change
			□ Remove
			Change
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	A (107)			
ffective date, if other than the an effective date is listed, the date mustote: If the date inserted in this bloocument's effective date on the December 1.	be specific and cannot be priced does not meet the apple	or to date of filing or micable statutory filin	(optional ore than 90 days after filing requirements, this date	l) g.) Pursuant to 605.0207 e will not be listed as
e record specifies a delayed The 90th day after the reco	effective date, but r rd is filed.	ot an effective t	ime, at 12:01 a.m	. on the earlier o
July 24	2019			
_ Chti	Signature of a member or au	hatized representation	of a member	
	- 5 or a archiber of all	and representative	or a member	
Christopher Maher		nted name of signee		

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Filing Fee: \$25.00