## L14100/90454

(Re	equestor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	<i>⇒</i> #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
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## **COVER LETTER**

TO:	Registration So Division of Co					
SIIDI	CaJen Con	cepts, LLC				
3014	,EC1.	Name of Lin	nited Liability Company	<del></del>		
The e	nclosed Articles of	Amendment and fee(s) are sub	omitted for filing.			
Please	e return all correspo	ondence concerning this matter	to the following:			
		Jennifer Coley				
Name of Person						
CaJen Concepts, LLC						
			Firm/Company	·		
		26348 Asuncion Drive				
			Address	·····		
		Punta Gorda, FL 33983				
			City/State and Zip Code			
		cajenconcepts@hotmail.com				
			to be used for future annual report notif	ication)		
For fu	rther information c	oncerning this matter, please c	all;			
Jenni	fer Coley		941 726-5300 at ()			
	Name o	f Person	Area Code Daytime	Telephone Number		
Enclo	sed is a check for th	ne following amount:				
<b>■</b> \$2	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:** 

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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

CaJen Concepts, LLC		
(Name of the Limited Liability Compa (A Florida Limited)	iny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company	were filed on 12/12/2014	and assigned
Florida document number L14000190454		
This amendment is submitted to amend the following:		
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 Liabi	lity Company," the designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:	26348 Asuncion Drive	
(Principal office address MUST BE A STREET ADDRESS)	Punta Gorda, FL 33983	
	· · · · · · · · · · · · · · · · · · ·	
Enter new mailing address, if applicable:	26348 Asuncion Drive	
Mailing address MAY BE A POST OFFICE BOX)	Punta Gorda, FL 33983	
•		
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		5
	-	<b>3 3 5</b>
Name of New Registered Agent:		SS 0 1-
New Registered Office Address:		
	Enter Florida street address	- COR - COR
	, Florida _	57 <b>N</b>
	Citv	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 = M $AMBR = A$	anager uthorized Member		
<u>Title</u>	Name	Address	Type of Action
		-	□ Add
			☐ Remove
			Change
			Add
			Remove
			□ Change
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Filing Fee: \$25.00