L15000019191

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

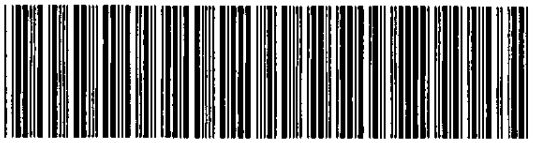
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900276435779

08/26/15--01021--010 **60.00

AUG 27 2015

J SHIVERS

15 AUG 26 PM 12:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

GESA II POOL SERVICE
10701 SAN BERNARDINO WAY
BOCA RATON FLORIDA 33428
561-4515941

STATEMENT

08/23/15

ACCT: 10-33071-003

ALFREDO YORRO
8651 NW 21 CT
CORAL SPRINGS FL 33071

Total Due $ 160.00

Amount Paid: $ _____

	PREVIOUS BALANCE	240.00		240.00
08/23/15	PAYMENT RECEIVED CHECK #1384		-160.00	-160.00
	September Service Charges	80.00		80.00

THANK YOU FOR YOUR PROMPT PAYMENT! (561)4515941
GESA II POOL SERVICE
10701 SAN BERNARDINO WAY
BOCA RATON FL, 33428

160.00

COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: CVSD 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:

Carlos E. Dávila
Name of Person

CVSD LLC
Firm/Company

10529 Santa Laguna Dr
Address

Boca Raton, FL 33428
City/State and Zip Code

cedavila70@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Mayli V. Torres at (561) 9217925
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

TO
ARTICLES OF ORGANIZATION
OF

CVSD 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 02/02/15 and assigned Florida document number L15000019191.

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 contain 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*

15 AUG 28 PM 12:35

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

or removed from our records:

MGR = Manager
AMBR = Authorized Member

Title	Name	Address	Type of Action
AMBR	Gisela Parra	10701 San Bernardino Way Boca Raton, FL 33428	☑ Add ☐ Remove ☐ Change
			☐ Add ☐ Remove ☐ Change
			☐ Add ☐ Remove ☐ Change
			☐ Add ☐ Remove ☐ Change
			☐ Add ☐ Remove ☐ Change
			☐ Add ☐ Remove ☐ Change

15 AUG 26 PM 12:38

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

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:
(b) The 90th day after the record is filed.

Dated August 23, 2015.

Signature of a member or authorized representative of a member

Carlos E Dávila

Typed or printed name of signee

Filing Fee: $25.00