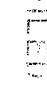
(Re	questor's Name)	
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PICK-UP	WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



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# **COVER LETTER**

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CUD IE		STMENT GROUP,LLC		
SUBJE	CI:	Name of Lim	ited Liability Company	<del></del>
		Amendment and fee(s) are sub-	_	
	·	SUHAIL AL-RIFAIE	-	
			Name of Person	
		CGS INVESTMENT GRO	DUP,LLC	
			Firm/Company	
		2715 EAST ADAMO DR.	SUITE A	
			Address	
		TAMPA,FL.33605		
		srifaie@saviausa.com	City/State and Zip Code	<del>-</del>
		-	to be used for future annual report notific	eation)
For furt	her information co	oncerning this matter, please ca	all:	
SUHA	IL AL-RIFAIE		813 300-7552	
	Name of	f Person	at () Area Code Daytime	Telephone Number
Enclose	d is a check for th	e 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

ited Liability Company as it now at (A Florida Limited Liability Compa	opears on our records.)	
		and assigned
lowing:		
of the limited liability compar	ı <u>y here</u> :	
words "Limited Liability Company,"	the designation "LLC" or the abb	reviation "L.L.C."
cable:		
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l/or registered office addres	2	
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	المهمية ما الما الما الما الما الما الما الما ا	<b>5</b>
Ente	r Florida street address	
	*** * *	
City	, Florida	Zip Code
	Liability Company were filed or lowing:  lowing:  of the limited liability company, "  cable:  ET ADDRESS)  d/or registered office address office address here:  NO CHANGE	ited Liability Company as it now appears on our records.)  (A Florida Limited Liability Company)  Liability Company were filed on May 12,2015  Liability Company were filed on May 12,2015  lowing:  of the limited liability company here:  words "Limited Liability Company," the designation "LLC" or the abb icable:  ET ADDRESS)  BOX)  CBOX)  Enter Florida street address  Florida

### 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
AMBER	Suhail Al-Rifaie	2715 East Adamo Dr, STE A	□ Add
		Tampa, Fl.33605	□ Remove
			_ ■ Change
AMBER	Mohammed Tazi	2715 East Adamo Dr. Ste A	□ Add
		Tampa,Fl. 33605	☐ Remove
			□ Remove
			D Add FT
			Retmove
			☐ Change
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(If an e	ctive date, if other than the	be specific ar	nd cannot be pri	or to date of fili	ng or more than	(option 90 days after fil	ing.) Pursuan	t to 605.
	: If the date inserted in this bloment's effective date on the De				ry filing requir	ements, this d	ate will not	be liste
	ecord specifies a delayed e 90th day after the rec			ot an effec	tive time, a	t 12:01 a.r	n. on the	earlie
Date	d JUNE 9TH		2015	·				
	٠		_		entative of a me			
	- July	~~~~	C					

Page 3 of 3

Filing Fee: \$25.00