

L15000203070

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☒ MAIL

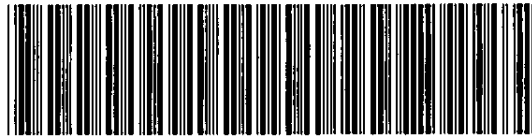
(Business Entity Name)

(Document Number)

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03/09/17--01004--001 **240.00

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DEPARTMENT OF STATE
17 MAR -8 AM 8:15

2017 MAR -8 AM 11:53

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SECRETARY OF STATE
ALL INFORMATION CONTAINED
HEREIN IS UNCLASSIFIED
DATE 03/09/17 BY 60322

M. MILLIGAN
MAR -9 2017

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Cambridge Capital Group 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:

Gail Milon

Name of Person

CAMBRIDGE CAPITAL WEALTH ADVISORS, LLC
Firm/Company

1400 VILLAGE SQUARE BLVD., STE 3-268
Address

TALLAHASSEE, FL 32312-1231
City/State and Zip Code

GAIL@CCWEALTHADVISORS.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

GAIL

Name of Person

at (850)
Area Code

270-9898

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

CAMBRIDGE CAPITAL GROUP LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

FILED
2017 MAR -8 AM 11:53
CLERK JAGUAR STATE
TALLAHASSEE FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 12/04/2015 and assigned Florida document number L15000203070.

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)

1400 VILLAGE SQUARE BLVD.
Ste 3-268
Tallahassee, FL 32312-1231

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

SEE ABOVE

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:

CITIL MILON

New Registered Office Address:

1400 VILLAGE SQUARE BLVD., STE 3-268

Enter Florida street address

Tallahassee

, Florida

32312

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.

Citil Milon
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>	<u>Address</u>	<u>Type of Action</u>
<u>PRES.</u> AMBR	<u>HOWARD, Phillip T.</u>	<u>2120 Killarney Way</u>	<input type="checkbox"/> Add
		<u>Tallahassee, FL 32309</u>	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
<u>PRES</u> AMBR	<u>LOIS KOONS</u>	<u>1400 VILLAGE SQUARE BLVD.</u>	<input checked="" type="checkbox"/> Add
		<u>STE 3-268</u>	<input type="checkbox"/> Remove
		<u>Tallahassee, FL 32312</u>	<input type="checkbox"/> Change
<u>VP</u> AMBR	<u>GAIL MILON</u>	<u>1400 VILLAGE SQUARE BLVD</u>	<input checked="" type="checkbox"/> Add
		<u>STE. 3-268</u>	<input type="checkbox"/> Remove
		<u>Tallahassee, FL 32312</u>	<input type="checkbox"/> Change
<u>TRK</u>	<u>MARK HALLIM</u>	<u>1400 VILLAGE SQUARE BLVD</u>	<input type="checkbox"/> Add
		<u>STE 3-268</u>	<input type="checkbox"/> Remove
		<u>Tallahassee, FL 32312</u>	<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

