116000009178

(R	Requestor's Name)	
(A	ddress)	
A)	ddress)	
(0	City/State/Zip/Phone #)	
PICK-UP	WAIT MAIL	
(E	Business Entity Name)	
(C	Occument Number)	
Certified Copies	Certificates of Status	
Special Instructions to Filing Officer:		





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03/20/17--01023--014 **25.00



MAR 2 1 2017 Y SULKER

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

CD GENERAL O		LLC
(<u>Name of the Limited Liability Compan</u> (A Florida Limited Li	y as it now appears on our records.) ability Company)	
The Articles of Organization for this Limited Liability Company version of the Coppe of the Florida document number 1600009178	were filed on $61/13$	201 b and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabil	ity company here:	
A/A		
The new name must be distinguishable and contain the words "Limited Liability	y Company," the designation "LLC" or th	e abbreviation "L.L.C."
Enter new principal offices address, if applicable:	NA	
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:	NA.	
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered office address here:		er the name of the new
Name of New Registered Agent: CAA''E	Luis Debler	3
New Registered Office Address:	SAMIE Enter Florida street address	
	, Florida	,a.,
	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 CRAIG LUIS DEALER

Page 1 of 3

	ing Authorized Person(s) authorized to man ed from our records:	age, enter the title, name, and address of each	person being added
MGR = AMBR =	Manager Authorized Member		
<u>Title</u>	Name	Address	Type of Action
AGENT	Deblea, Christopher	C 2125 Willow Beice	Add
		Rd. WINDERHEEE FL	Remove
		34786	Change
PRES	Deblee, christophe	SOME	D Add
	C.	SAME	Remove
			☐ Change
AGENT	DEDIED, COAIG Lui.	<u></u>	Add
		SAME ADDRESS	□ Remove
			Change
P <u>ees.</u>	DEDIFE, CRAIG LUIS	SAME ADDRESS	_b\Add
•			Change:
			IR 20
			Bremove
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E. Effective date, if other than the date of filing: 03-17-17 (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 da Note: If the date inserted in this block does not meet the applicable statutory filing requirement document's effective date on the Department of State's records.	nts, this date will not be	605.0207 listed as	(3)(b the
If the record specifies a delayed effective date, but not an effective time, at 12 (b) The 90th day after the record is filed.	2:01 a.m. on the ea	rlier of	:
Dated March 17, 2017,			
Signature, if a incomber or authorized representative of a member			

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Filing Fee: \$25.00