

L160000019880

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H16000067009 3)))



H160000670093ABC5

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : PRONTO TAX & ACCOUNTING SERVICES,
Account Number : I200900000055
Phone : (305) 267-1092
Fax Number : (305) 267-2819

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: reoronado@prontotax.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
C.A.G. CAPITAL MANAGEMENT LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

2016 MAR 16 P 12:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

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

4160000670093

C.A.G. CAPITAL MANAGEMENT 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 FEBRUARY 2, 2016Florida document number L16000019880

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."

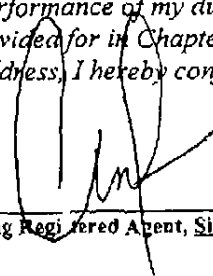
Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)8950 SW 74TH CT STE 2222MIAMI, FL 33156

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)8950 SW 74TH CT STE 2222MIAMI, FL 33156B. 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:CARLOS A. GONZALEZNew Registered Office Address:8950 SW 74TH CT STE 2222*Enter Florida street address*MIAMI*City*Florida 33156*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

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

H160000670093

E. Effective date, if other than the date of filing: MARCH 16, 2016 (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 MARCH 16 2016

Signature of a member or authorized representative of a member

CARLOS A. GONZALEZ

Typed or printed name of signer

FILED
2016 MAR 16 P 12:03
SECRETARY OF STATE
TREASURER OF FLORIDA

H160000670092