

FAX

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Division of Corporations

Florida Department of State

Division of Corporations
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To:

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

From:

Account Name : CLAUDIA LIMA TAX & ACCOUNTING LLC
Account Number : 120230000193
Phone : (407)552-7903
Fax Number : (407)449-2348SECRETARY OF STATE
TALLAHASSEE, FL

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

Email Address: INFO@CLAUDIALIMATAX.COMLLC AMND/RESTATE/CORRECT OR M/MG RESIGN
LAKE CWB INVESTMENTS LLC

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: LAKE CWB INVESTMENTS 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:

CLAUDIA LIMA

Name of Person

CLAUDIA LIMA TAX & ACCOUNTING LLC

Firm/Company

9100 CONROY WINDERMERE RD STE 200 OFFICE 241

Address

WINDERMERE, FL 34786

City/State and Zip Code

INFO@CLAUDIALIMATAX.COM

E-mail address: (to be used for future annual report notification)

SECRETARY OF STATE
TALLAHASSEE, FL

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For further information concerning this matter, please call:

CLAUDIA LIMA

407

5527903

at ()

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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

LAKE CWB INVESTMENTS 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 02/05/2016 and assigned
Florida document number L16000025950.

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:

CLAUDIA LIMA TAX & ACCOUNTING LLC

New Registered Office Address:

9100 CONROY WINDERMERE RD SUITE 200 OFFICE 241

Enter Florida street address

WINDERMERE

City

Florida 34786

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

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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>
AMBR	GIULIA MARTINS SELIG	3115 PEQUOD PL.	<input checked="" type="checkbox"/> Add
		KISSIMMEE, FL 34746	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	GUILHERME MARTINS SELIG	3115 PEQUOD PL.	<input checked="" type="checkbox"/> Add
		KISSIMMEE, FL 34746	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Remove
			<input 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

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Filing Fee: \$25.00