46000059212

(Requestor's Name)				
(Address)				
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PICK-UP WAIT MAIL				
(Business Entity Name)				
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COVER LETTER

	gistration Sec ision of Corp			
emplect.	CRG GARA			
SUBJECT:		Name of Limi	ted Liability Company	
The enclosed	l Articles of A	amendment and fee(s) are sub-	mitted for filing.	
Please return	all correspon	dence concerning this matter (to the following:	
		Hannie Chahin		
		CRG GARAGE, LLC	Name of Person	
		4300 NW 22 Avenue	Firm/Company	
		Miami, FL 33142	Address	
		chahinhannye@hotmail.com	City/State and Zip Code	
		E-mail address: (t	o be used for future annual report notific	ation)
For further in	nformation co	ncerning this matter, please ca	.ll:	
Hannie Chal			786 389-7479 at ()	
	Name of	Person	Area Code Daytime 1	Felephone Number
Enclosed is a	check for the	following amount:		
■ \$25.00 F	iling 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

STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building

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

CRG GARAGE, LLC		
(<u>Name of the Limited Liability</u> (A Florida L	Company as it now appears on our records.) imited Liability Company)	
The Articles of Organization for this Limited Liability Cor	npany were filed on March 23, 2016	and assigned
Florida document number L16000059212		<u> </u>
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limite	d liability company here:	
The new name must be distinguishable and contain the words "Limited	d Liability Company," the designation "LLC" or th	e abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRE.	<u> </u>	
		7.0
		ر د ب
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		<i>5</i> ,
		= -
		्रं,
3. If amending the registered agent and/or register registered agent and/or the new registered office address	red office address on our records, <u>ent</u> s <u>s here</u> :	er the name of the
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Florida	
	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.

Zip Code

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>	Type of Action
MGR	Hannie Chahin	4300 NW 22nd Avenue, Miami, FL 33142	■ Add
			
			5 .01
			Remove
			Change
			□ Remove
			П С
			□ Remove
			Change
			Remove
			Add
			□ Remove□ Change

D. If amending any other information, enter change(s	g actes (Anach adamonal sheets, y hecessary.)
	e prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(applicable statutory filing requirements, this date will not be listed as the cords.
f the record specifies a delayed effective date, bub) The 90th day after the record is filed.	ut not an effective time, at 12:01 a.m. on the earlier of:
Dated July 19 April 20	
Signature of a member of	or authorized representative of a member

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00