L'IL 200 (01651

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP	WAIT MAIL	
(Business Entity Name)	
(Document Number)		
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16 MAY 31 AM 7: 01 SEURETARY OF STATE IAUT AHASSEE FLORIDA

MELISSA D. MUNROE ATTORNEY AT LAW 515 N. Ferncreek Avenue ORLANDO, FLORIDA 32803

REPLY TO: P.O. Box 533942 Orlando, FL 32853

Telephone (407) 841-2522

email:mlissamunroe@aol.com

May 27, 2016

Amendment Section
Division of Corporations
Florida Department of State
P.O. Box 6327
Tallahassee, FL 32314

RE: Golf Development Services, LLC

Dear Sir or Madame:

Enclosed herein is the duly executed original and a copy of the Articles of Amendment to Articles of Organization for CNMH Investment Group, LLC and a check in the amount of \$25.00 for payment involved in amending said limited liability company.

Thank you so much for your assistance in this matter. Please let me know if you need anything further.

yery truly yours,

Melissa D. Munroe

Enclosures

COVER LETTER

CNMK IN	NVESTMENT GROUP, LLC		
SUBJECT:	Name of Lim	nited Liability Company	
The enclosed Articles of	f Amendment and fee(s) are sub	omitted for filing.	
Please return all corresp	oondence concerning this matter	to the following:	
	Colm Nolan		
		Name of Person	
		Firm/Company	
	1407 E. Washington St.		
		Address	
	Orlando, FL 32801		
		City/State and Zip Code	
	E-mail address: (to be used for future annual report notif	ication)
For further information	concerning this matter, please c	all:	
Melissa D. Munroe, Es		407 841-2522 at ()	
Name	of Person	Area Code Daytime	e 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:

TO:

Registration Section Division of Corporations

> 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

CNMK INVESTMENT GROUP, LLC		
(<u>Name of the Limited Liability Compa</u> (A Florida Limited I	ny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company	were filed on 05/24/2016	and assigned
Florida document number L16000101651		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
CNMH INVESTMENT GROUP, LLC		
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	1407 E. Washington St, #4	
(Principal office address MUST BE A STREET ADDRESS)	Orlando, FL 32801	
-		
Enter new mailing address, if applicable:	Arter Britanisms	
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered of	· -	nter the name of the
registered agent and/or the new registered office address her	<u>e</u> :	
		25 to 12
Name of New Registered Agent:	·	
New Registered Office Address:		
	Enter Florida street address	0K1 0K1 0K1
	, Florid	
	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

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>	Name	Address	Type of Action
MGR	COLM NOLAN	1407 E. Washington St., #4	
		Orlando, FL 32801	Remove
			Change
MGR	MGR COLUM NOLAN	1407 E. Washington St., #4	
		Orlando, FL 32801	■ Remove
			☐ Change
AMBR	MATTHEW HULTS	1407 E. Washington St.	
		Orlando, FL 32801	☐ Remove
			☐ Change
AMBR	MATTHEW HOLTS	1407 E. Washington St.	_ □ Add
		Orlando, FL 32801	■ Remove
			☐ Change
			□ Add
			□ Remove
			☐ Change
			Add
			□ Remove
			Change

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ective date, if other than the date of filing:	(optional)
n effective date is listed, the date must be specific and cannot be prior to date of filing te: If the date inserted in this block does not meet the applicable statutory	g or more than 90 days after filing.) Pursuant to 605.02
cument's effective date on the Department of State's records.	y ming requirements, this date with not be fisical
record specifies a delayed effective date, but not an effect	ive time at 12:01 a.m. on the earlier
The 90th day after the record is filed.	ave time, at 12.01 a.m. on the earner
red 5/27 , 2014	

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00