

L16 000141560

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

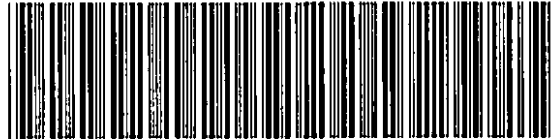
(Business Entity Name)

(Document Number)

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2022 MAY 24 AM 7:16

J SIMMONS  
MAY 25 2021



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

RECEIVED

2021 MAY 24 PM 2:28

CLERK OF THE COURT  
TALLAHASSEE, FL

April 22, 2021

AKENATON PIERRE  
1171 NE 149 ST  
MIAMI, FL 33161

SUBJECT: CAPITAL INVESTMENT GROUP A&S, LLC  
Ref. Number: L16000141560

We have received your document for CAPITAL INVESTMENT GROUP A&S, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

The document number of the name conflict is P11000067863.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Octavia L Simmons  
Regulatory Specialist II Supervisor

Letter Number: 021A00008313

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT: Capital Investment Group A&S, 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:

Akenaton Pierre

Name of Person

Firm/Company

1171 NE 149 St

Address

Miami, FL 33161

City/State and Zip Code

akenatonpierre@gmail.com

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

For further information concerning this matter, please call:

Akenaton Pierre

Name of Person

at ( )

Area Code

786-578-2556

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**

Capital Investment Group A&S, LLC  
(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

2022 MAY 24 AM 7:16

The Articles of Organization for this Limited Liability Company were filed on 07/29/2016 and assigned  
Florida document number L16000141560.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

Golden Thumb Development Group, LLC

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:

N/A

New Registered Office Address:

1171 NE 149 St. Ste. 103

*Enter Florida street address*

Miami

*City*

Florida

33161

*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

2022 MAY 24 AM 7:16

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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2022 MAY 21 AM 7:16

(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)

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 May 18, 2021

Akenaton R. Pierre

Typed or printed name of signee