L16000 211280

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ldress)	
(Cir	ty/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Bu	usiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
	<u></u>	

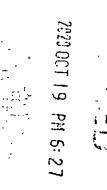
Office Use Only



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10/19/20--01005--002 **25.00

NOV 19 2020 S. YOUNG



COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: CFREE 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:
Pamela MCColloch
CFREE LLC Firm/Company
28 Thonton Ave. N.
City/State and Zip Code PMCC0117130 a01, Com E-mail address: (to be used for future annual report notification)
·
For further information concerning this matter, please call:
Panela McColloch at (407) 718-5927 Name of Person Area Code Daytime Telephone Number
Enclosed in a check for the following amount:
S25.00 Filing Fee Certificate of Status Certified Copy (additional copy is enclosed) 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 ARTICLES OF ORGANIZATION **OF**

C'FREE LI	- C		£-3	
(Name of the Limited Liability C (A Florida Lin	ompany as it now appear nited Liability Company)	s on our records.)	1000	ا بر
The Articles of Organization for this Limited Liability Com	pany were filed on	1/17/2016	and assigned	ĩ.
Florida document number <u>L 16 000 2 11 2-80</u>)		P	ا ماد سا
(Name of the Limited Liability Conf.) The Articles of Organization for this Limited Liability Complete Articles of Organization for this Limited Liability			6: 27	
A. If amending name, enter the new name of the limited	l liability company he	re:		
The new name must be distinguishable and contain the words "Limited"	LLC			
The new name must be distinguishable and contain the words "Limited	Liability Company," the de	esignation "LLC" or th	e abbreviation "L.L.C."	
Enter new principal offices address, if applicable:				_
(Principal office address MUST BE A STREET ADDRES.	<u>(S)</u>			
	-			_
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE BOX)				_
				
B. If amending the registered agent and/or registered of	fice address on our re	ecords, enter the n	ame of the new regis	stered
agent and/or the new registered office address here:		, <u></u>		
Name of New Registered Agent:				_
New Registered Office Address:				
	Enter Flori	ida street address		
	City	, Florida	Zip Code	
New Registered Agent's Signature, if changing Registered Ag	•		λφ Code	
		variation I first have	arman to annually wit	h tha
I hereby accept the appointment as registered agent and provisions of all statutes relative to the proper and comp				
accept the obligations of my position as registered agent	•	•	-	IS
being filed to merely reflect a change in the registered of company has been notified in writing of this change.	jjice adaress, 1 nereb	y conjirm that the	итива нарицу	

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>	<u>Name</u>	<u>Address</u>	Type of Action
			□Remove
			Change
		_ _	□Add
			Remove
		-	□Change
		,	
		<i>:</i>	□Remove
			□Change
			Remove
			□Change
		□Add	
			CRemove
	- 		
			□Remove
			□ Change

If ame	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
_	I Want to Change the hame of
_	I Want to Change the name of LLC to; Cfree Cancer free LLC.
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If an eff <u>Note:</u>	ive date, if other than the date of filing: 1014000 (optional) ective 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 (If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as t ent's effective date on the Department of State's records.
e recor rd is fi	d 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 led.
Dated	October, 13 2020
	July a Grand Collo Ch
	Signature of a member or authorized representative of a member Panela MCANIAA
	Typed or printed name of signee