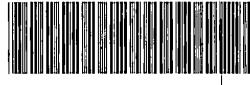
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(Requestor's Name)
(Address)
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(Business Entity Name)
(Document Number)
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To whom it may concern:

I am changing the name of our corporation from "Full Circle Backgrounds" to "Cosley Torres-Investigations, LLC".

I have attached our filing fee of \$25.

My phone number is 904-460-5940.

Return address:

1951 NW 7th Ave. Suite 160-110

Miami, FL 33136

Thank you!

Kasey Cosley

Rafael Torres

COVER LETTER

FULL CIR SUBJECT:	CLE BACKGROUNDS, LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Milton Fuentes, Esq.		
		Name of Person	
	M. Fuentes & Co.		
		Firm/Company	
	PO Box 431725		
	•	Address	
	Miami, Florida 33243		
	Milton@Fuentes.Law	City/State and Zip Code	
For further information of	E-mail address: (i concerning this matter, please co	to be used for future annual report notifull:	ication)
Milton Fuentes		305 447-1960	
Name e	of Person		: Telephone Number
Enclosed is a check for t	he 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 englosed)

MAILING ADDRESS:

Registration Section

Division of Corporations

TO:

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

TO ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FULL CIRCLE BACKGROUNDS, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

(A	Florida Limited L	iability Company)	
The Articles of Organization for this Limited Liab	pility Company	were filed on 02/08/2017	and
Florida document number L17000030837	mily Company		
rionda document number	 .		
This amendment is submitted to amend the follow	/ing:		
A. If amending name, enter the new name of the	he limited liabi	lity company here:	
COSLEY TORRES INVESTIGATIONS, LLC			
The new name must be distinguishable and contain the wor	ds "Limited Liabil	ity Company," the designation "E.F.C" or t	he abbreviation '
Enter new principal offices address, if applicab	ole:	1951 NM 7	th the
(Principal office address MUST BE A STREET	ADDRESS)	Sitt 160-11	0
		Miani, PC	33/3
		,	
Enter new mailing address, if applicable:		- Same!	
(Mailing address MAY BE A POST OFFICE BO	OX)		
B. If amending the registered agent and/or registered agent and/or the new registered office	-	· -	ter the name
Name of New Registered Agent:			<u> </u>
New Registered Office Address:			
		Enter Florida street address	
		, Florida	a
		Cay	Zip Code
New Registered Agent's Signature, if changing Re	gistered Agent:		
I hereby accept the appointment as registered a provisions of all statutes relative to the proper accept the obligations of my position as registe being filed to mcrely reflect a change in the reg company has been notified in writing of this ch	and complete ered agent as p gistered office	performance of my duties, and La provided for in Chapter 605, F.S.	ım familiar wı Or, if this doc
	Ices	aina Danieraned tanne Circumstan of Van	n Di.

MGR = M $AMBR = A$	anager uthorized Member		
<u>Title</u>	<u>Name</u>	<u>Address</u>	Тура
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II an effe	re date, if other than the date of filing:	
	nt's effective date on the Department of State's records.	
the reco	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the 30th day after the record is filed.	e ea
Dated_	9/19/	
	Signature of a member or authorized representative of a member	
	Ruse y Costey Typed or printed name of signee	
	/ Typed or printed name of signee	

D. If amending any other information, effect change(s) here. (Attach daditional sheets, if necessary.)

Page 3 of 3

Filing Fee: \$25.00