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COVER LETTER

Div	ision of Corp	porations				
SUBJECT:	CBR Group LLC					
		Name of Lim	ited Liability Company			
The enclosed	d Articles of a	Amendment and fee(s) are sub	mitted for filing.			
Please return	all correspon	ndence concerning this matter	to the following:			
		Leonel A Rodriguez				
		-	Name of Person			
		CBR Group LLC				
CBR Group LLC Firm/Company 14331 SW 120 ST STE 101 Address						
		Address				
		Miami, FL 33186				
		info@greenlife-llc.com	City/State and Zip Code			
		E-mail address: (to be used for future annual report notific	cation)		
For further in	nformation co	oncerning this matter, please co	all:			
Dario Perett			786 402-8955 at ()	Telephone Number		
	Name of	Person	Area Code Daytime	Telephone Number		
Enclosed is a	a check for th	e following amount:				
■ \$25.00 F	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

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

CBR Group LLC			
(<u>Name of the Limited Liability Co</u> (A Florida Lim	ompany as it now appears on our raited Liability Company)	ecords.)	
he Articles of Organization for this Limited Liability Comp	pany were filed on 02/20/17	and assign	ned
lorida document number L17000039633			
his amendment is submitted to amend the following:			
. If amending name, enter the new name of the limited	liability company here:		
he new name must be distinguishable and contain the words "Limited l	Liability Company," the designation	"LLC" or the abbreviation "L.L.C	<u> </u>
inter new principal offices address, if applicable:			
Principal office address MUST BE A STREET ADDRESS			
inter new mailing address, if applicable:		201 7AL	
Mailing address MAY BE A POST OFFICE BOX)			
		25 N	<u>. </u>
		A MATT	
. If amending the registered agent and/or registered	d office address on our rec	cords, enter the mame of	i ithe
egistered agent and/or the new registered office address	here:	N N	,
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street a	ddress	
	· · · · · · · · · · · · · · · · · · ·	_, 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.

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
MGR	CORTI, LUCIANO	14331 SW 120TH ST SUITE 101	
		MIAMI, FL 33186	■ Remove
			Change
MGR	BERISSO, GUILLERMO F	14331 SW 120TH ST SUITE 101	
		MIAMI, FL 33186	■ Remove
			□ Change
			Add
			□ Remove
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Effective date, if other than that if an effective date is listed, the date m			o date of filing o	(r more than 90 days	optional) after filing) Pursuant to	5 605 020
Note: If the date inserted in this bedocument's effective date on the I	lock does not n	neet the applica	ble statutory fi	ling requirements	s, this date will not be	listed a
document seriective date on the t	separation of 5	nate a records.				
ne record specifies a delaye The 90th day after the re			an effectiv	e time, at 12:	01 a.m. on the e	arlier o
Dated May 16th		2019				
	<u>ラ</u>	·	_ `			
•				ve of a member		

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00