# 11700042519

(Re	equestor's Name)	
(Ad	dress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
,		

Office Use Only



300306502843

12/11/17--01018--026 ++25.00

DEC 1 2 2017
Y SULKER

## **COVER LETTER**

TO: Registration Section Division of Corporations			
SUBJECT: <u>WLT BRANCI</u>	C LLC ne of Limited Liability C	'ompany	·
The enclosed Articles of Amendment and fee(	) are submitted for fili	ng.	
Please return all correspondence concerning th	is matter to the followi	ng:	
<i>M</i>	ARISSA D	BACA f Person	
	Branding	on LiC	
<u> </u>	ARADIAA MAAAA	LA E	
West	PAIM Bep City/State ar	ACH FC	334 do
Maria Mania Maria Mania Maria Maria Mania Maria Maria Mania Maria Mania Maria Mania Maria Mania Maria Mania Maria Maria Maria Mania Mania Maria Mania Mania Mania Mania Mania	OULT brown address: (to be used for fi	dng. cm uture annjual report no	diffication)
For further information concerning this matter,	please call:		
MARISSA O'BRICO Name of Person	at ( )	a Code Daytin	- 5048 me Telephone Number
Enclosed is a check for the following amount:			
\$25.00 Filing Fee \$30.00 Filing Fe Certificate of S	tatus Certifi	Filing Fee & ed Copy nal 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/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CVLT Brandage	3, LLC.	
(Name of the Limited Liability Compa (A Florida Limited I	ny\as it now appears on our records.) .hability Company)	
The Articles of Organization for this Limited Liability Company Florida document number <u>LITO600 42519</u> .  This amendment is submitted to amend the following:  A. If amending name, enter the new name of the limited liab		and assigned
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" or the ab	obreviation "L.L.C,"
Enter new principal offices address, if applicable:	1412 Arphian Ra	E
Principal office address MUST BE A STREET ADDRESS)	West Palm zeach	
	Florida 33406	<del> </del>
Enter new mailing address, if applicable:  Mailing address MAY BE A POST OFFICE BOX)	1412 Arabion Rd Weg- Palm Beach Florida 33406	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here	fice address on our records, <u>enter</u> :	the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	F village © for
	, Florida	<b>\</b>
	Ciry	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>	Address	Type of Action
		·	
			□ Remove
	<del></del>		
			Add
		·	□ Remove
			Change
<del></del>			
			O Remove
			Change
	<del></del> -		
			□ Remove
		Change	
	<del></del>	<del></del>	D Add
		□ Remove	
		☐ Change	
		Add	
			□ Remove
			Change

_	
_	<del></del>
_	
_	
_	
_	
_	
_	
_	
	<del></del>
(If an effe Note: I	re date, if other than the date of filing:
The S	ord specifies a delayed effective date, but not an effective time, at $12:01~a.m.$ on the earlier of 00th day after the record is filed.
Dated _	NOUNTED 28 DOIT
	Ollarina Navier
	Signature of a member or authorized representative of a member

Page 3 of 3

Filing Fee: \$25.00