LITOCOCATION

(Requestor's Name)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
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(Business Entity Name)
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J. HORNE APR - 6 2023

COVER LETTER

TO:

Registration Section

Division of Corp	porations"			
SUBJECT:			. 	
	Name of Limi	ited Liability Company	· ·	
The enclosed Articles of a	Amendment and fee(s) are subi	mitted for filing.		
	ndence concerning this matter			
rease retain an correspo	ndence concerning and maner	to the totto ing.		
	Gabriel	A costa		
		Name of Person		
		Firm/Company		
	12401 Cran	ap Dr Svite 216		
		- Maress		
	Vavir FL 3	3330 City/State and Zip Code EMBLenders . com to be used for future annual report noti		
	(7 Avista WE	EMOLENTERS COM		
	E-mail address: (to be used for future annual report noti	tication)	
for further information c	oncerning this matter, please ca	all:		
Chalciel A	rcosta	at (<u>305</u>) <u>458-</u> Area Code Daytin	6174	
Name o	f Person	Area Code Daytin	ne Telephone Number	
Enclosed is a check for th	ne 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 Addres	<u> </u>	Street Address:		
Registration !	Section	-	Registration Section	
Division of Corporations P.O. Box 6327		Division of Corporations The Centre of Tallahassee		
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

211 ED

R W Investment Group LLC 2023 AFR -6 FH12: 52
(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)
grand the state of
The Articles of Organization for this Limited Liability Company were filed on $\frac{3/21/17}{17}$ and assigned
Florida document number <u>L 1700063967</u> .
This amendment is submitted to amend the following:
A. If amending name, enter the new name of the limited liability company here:
CAND Investment Croup LLC The new name must be distinguishable and contain the words Limited Liability Company," the designation "LLC" or the abbreviation "LLC."
he 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 BON
B. If amending the registered agent and/or registered office address on our records, <u>enter the name of the new registere</u> agent and/or the new registered office address here:
Name of New Registered Agent:
New Registered Office Address: Enter Florida street address
Florida
, Florida

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
			□Add
			□Remove
			□Change
	44		□Add
			□Remove
			Change
			□Add
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			□Change
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			□Remove
			☐ Change

D. If amending	any other information, enter change(s) here: (Attach additional sheets, if necessary.)
,	
<u></u>	
Note: If the	ate, if other than the date of filing: 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)(a date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the effective date on the Department of State's records.
If the record spe record is filed.	eifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated	
	GABRIEL ACOSTA
	Signature of a member or authorized representative of a member
	GABRIEL ACOSTA
•	Typed or printed name of signee

Filing Fee: \$25.00

To whom it May Concern,

I, Gabriel Acosta, authorized Florida Division of Corporations to release EMB Lenders, LLC name and use the same name when approving the change of name request to EMB Lenders Corp.

Gabriel Acosta

305-458-6174

Info@EMBLenders.com