## L17000 126 058

(Req	uestor's Name)	
(Addi	ress)	
(Add	ress)	
(City)	/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Busi	iness Entity Nar	ne)
(Doc	ument Number)	
Certified Copies	Certificates	of Status
Special Instructions to F	iling Officer:	

Office Use Only



100335295521

10/21/19--01009--008 \*\*25.00

FILED
2019 OCT 21 MH 9: 57
SECRETARY OF STATE

'' SUILKER NOV 0 7 2019

## **COVER LETTER**

	C		
SUBJECT:		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:	
	Charles Anzalone		
		Name of Person	
	CTAA, LLC		
		Firm/Company	
	7050 W Palmetto Park Roa	d Unit 25	
		Address	
	Boca Raton, FL, 33433		
	DBAEAGLEEYE@GMAIL.C	City/State and Zip Code OM	<del></del>
	E-mail address: (	to be used for future annual report notif	ication)
For further information of	concerning this matter, please ca	all:	
Charles Anzalone		561 837-2228 at ()	
Name (	of Person	Area Code Daytime	Telephone Number
Englosed is a check for t	ha fallawina amaunt		
/	-	Eleccoopii F	D 640.00 ET E
■ \$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 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

CIAA, LLC			
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our reco Liability Company)	ords.)	
The Articles of Organization for this Limited Liability Company Florida document number L17000126058	were filed on 06/08/2017	and assigned	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ility company here:		
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "I	J.C" or the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:	7050 W Palmetto Park Rd Unit 25		
(Principal office address MUST BE A STREET ADDRESS)	Boca Raton, FL 33433		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		SECOND T	
B. If amending the registered agent and/or registered o registered agent and/or the new registered office address her		ords, enter the name of the n	
Name of New Registered Agent:			
New Registered Office Address:	Enter Florida street add	dress	
		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>	Address	Type of Action
MGR	SHADI ETEZADY	7050 W Palmetto Park Road Unit 25 Boca Raton, Ft. 33433	
			☐ Remove
			Change
			Add
			□ Remove
			□ Add
			☐ Remove
			□ Change
			☐ Add
			☐ Remove
			☐ Change
			Add
			☐ Remove
			Change
			□ Add
			☐ Remove
			Change

	<del></del>		<del></del>	
	<del> </del>		· · · · · · · · · · · · · · · · · · ·	
<del></del>				
	<del></del>			
		· - · ·		
			7	
ective date, if other than the effective date is listed, the date made: If the date inserted in this becament's effective date on the	block does not meet the	applicable statuto	ng or more than 90 days ry filing requirements	optional) after filing.) Pursuant to 605.0 , this date will not be listed
record specifies a delaye he 90th day after the re		out not an effec	tive time, at 12:0	01 a.m. on the earlie
October 17	2019			
DD /	Amalus Signature of a member			

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00