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COVER LETTER

		stration Sec sion of Corp				
SUBJEC		Cenzo Inves	tments, LLC			
SUBJEC	, I i		Name of Lim	ited Liability Company		
The enck	osed	Articles of A	Amendment and fee(s) are sub	mitted for filing.		
Please re	turn	all correspor	ndence concerning this matter	to the following:		
			Michael D. Finn			
				Name of Person		
			Finn Law Group, P.A.			
				Firm/Company	· · · ·	
			7431 114th Ave Ste # 104			
				Address		
			Largo, FI 33773			
				City/State and Zip Code		
			michaeldfinn@finnlawgroup.com			
			E-mail address: (to be used for future annual rep	oort notification)	
For furthe	er in	formation co	ncerning this matter, please ca	all:		
Michael I	Finn 727 214-0700 x 107					
		Name of	Person	Area Code	Daytime Telephone Number	
Enclosed	is a	check for the	e following amount:			
■ \$25.0	00 Fi	ling Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclose	ed) Certified	e of Status &

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

Cenzo Investments, LLC			
(<u>Name of the Limited Liability Compa</u> (A Florida Limited L	nv as it now appears on our records.) Liability Company)		
The Articles of Organization for this Limited Liability Company were filed on $\frac{06/14/2017}{\text{Lorida document number}}$		and assigned	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabi	ility company here:		
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:		1 DIV	
(Principal office address MUST BE A STREET ADDRESS)		WW.	
-		25 82.	
		9 6	
Enter new mailing address, if applicable:		RP SPC	
Mailing address MAY BE A POST OFFICE BOX)		79. AN	
		<u> </u>	
3. If amending the registered agent and/or registered of registered agent and/or the new registered office address here Name of New Registered Agent:	fice address on our records, enter	the name of the r	
New Registered Office Address:	Enter Florida street address		
	. Florida		
	City . Florida	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

Title	<u>Name</u>	Address	Type of Action
mgr	Vincent G. Mileto	304 S. 3rd St. Brighton, Mi, 48116	
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ffective date, if other than the an effective date is listed, the date mulote: If the date inserted in this bocument's effective date on the D	st be specific and cannot be lock does not meet the a	pplicable statutory fi	or more than 90 days after tiling requirements, this	iline) Pursuant to 60	05.02 sted :
e record specifies a delayed The 90th day after the rec	d effective date, bu ord is filed.	t not an effectiv	e time, at 12:01 a.	.m. on the earl	lier
ated May 24 May 6	2018 Signature of a member or	· · · · · · · · · · · · · · · · · · ·			

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Filing Fee: \$25.00