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## COVER LETTER

	egistration Sectivision of Corp		
		LDINGS, LLC	
SUBJECT	:	Name of L	imited Liability Company
The enclose	ed Articles of	Amendment and fee(s) are s	ubmitted for filing
Please retu	rn all correspo	ndence concerning this matt	er to the following:
		Carl Resaul-Maraj	
			Name of Person
		CARM HOLDINGS	LC
			Firm/Company
		1750 Penrith Loop	
		i i	Address
		Orlando, FL 32824	
		cr.carm@yahoo.com	City/State and Zip Code
		E-mail address	s: (to be used for future annual report notification)
For further	information co	oncerning this matter, please	e call:
Carl Resau	l-Maraj		407 729-3685 at ( )
	Name of	Person	Area Code Daytime Telephone Number
Enclosed is	a check for th	e 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 ADDRESS:		**	STREET/COURIER ADDRESS:
Registration Section Division of Corporations		n of Corporations	Registration Section Division of Corporations
	P.O. Bo Tallaha	ox 6327 ssee, FL 32314	Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION **OF**

CARM HOLDINGS, LLC	
(Name of the Lim	ted Liability Company as it now appears on our records.) (A Florida Limited Liability Company)
The Articles of Organization for this Limited E Florida document number	iability Company were filed on and assigned
This amendment is submitted to amend the following the fol	lowing:
A. If amending name, enter the new name of	of the limited liability company here:
The 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 appli	cable:
(Principal office address MUST BE A STREI	ET ADDRESS)
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	
B. If amending the registered agent and registered agent and/or the new registered o	Vor registered office address on our records, enter the name of the new
Name of New Registered Agent:	7 SEP II
New Registered Office Address:	Enter Florida street address Florida
New Registered Agent's Signature, if changing	City STZip Code  Registered Agent:
I hereby accept the appointment as register provisions of all statutes relative to the propaction as registery	ed agent and agree to act in this capacity. I further agree to comply with the per and complete performance of my duties, and I am familiar with and istered agent as provided for in Chapter 605, F.S. Or, if this document is registered office address, I hereby confirm that the limited liability

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
AMBR	RESAUL-MARAJ, CARI.	1750 PENRITH LOOP	
		ORLANDO, FL 32824	Remove
			Change
AMBR	RESAUL-MARAJ, VINDEIRA	1750 PENRITH LOOP	
		ORLANDO, FL 32824	Remove
			Change
		<u> </u>	Add
		<del></del>	□ Remove
			Change
			Add
			□ Remove
			☐ Change
<del></del>			
			Remove
			Change
<del></del>		<del></del>	D Add
			□ Remove
			Change

D. If amending any other information, ent	er change(s) here: (Attach additional sheets, if necessary.)	
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E. Effective date, if other than the date of it (If an effective date is listed, the date must be specifically in this block does a document's effective date on the Department.	and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0 not meet the applicable statutory filing requirements, this date will not be listed	0207 (3)(b d as the
If the record specifies a delayed effective (b) The 90th day after the record is fi	 ve date, but not an effective time, at 12:01 a.m. on the earlied led. 	r of:
August 29 Dated	2017	
<u> </u>		
Signature	of a member or authorized representative of a member	
Carl Resaul-Maraj		
	Typed or printed name of signee	
	Page 3 of 3	
	Filing Fee: \$25.00	