## 117000202110

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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## **COVER LETTER**

TO:	Registration S Division of Co.			
end ie		ONE BUSINESS GROUP, LLC		
SUBJE	CI:	Name of Lim	ited Liability Company	
The enc	losed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please r	eturn all corresp	ondence concerning this matter	to the following:	
		ROXANA TUMBACO		
		••••	Name of Person	<del> </del>
			Firm/Company	
		4835 HOLLYWOOD BLV	VD SUITE 4	
			Address	
		HOLLYWOOD, FL 3302	1	
		A CCOLD PERMIC OCCUPANTO	City/State and Zip Code	
		ACCOUNTING@CORNE	to be used for future annual report notification	fication)
For furt	her information	concerning this matter, please ca	all:	
ROXA	NA TUMBACO		786 597-9461 at ( )	
	Name	of Person		e Telephone Number
Enclose	d is a check for t	the following amount:	•	
\$25	.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	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

		City		Zip Code	
	HOLLYWOOI	<u> </u>	, Florida	33021	
New Registered Office Address:			Florida street address	· · · · · · · · · · · · · · · · · · ·	
New Registered Office Address:	4835 HOLLYV	VOOD BLVD S	SUITE 4	· · · · · · · · · · · · · · · · · · ·	
Name of New Registered Agent:				4,00	
registered agent and/or the new registered o			on our records, <u>em</u>	er the name o	i ine-nev
B. If amending the registered agent and	law madistance o	Maa addussa	on our records out		
					<del>Z</del>
(Mailing address MAY BE A POST OFFICE	BOX)	HOLLYWO	OD, FL 33021		<del>~</del>
Enter new mailing address, if applicable:		4835 HOLLY	YWOOD BLVD SUITE	: 4	
(Principal office address MUST BE A STREE	ET ADDRESS)	HOLLYWO	OD, FL 33021		
Enter new principal offices address, if applic	cable:	4835 HOLLY	YWOOD BLVD SUITE	<b>4</b>	
The new name must be distinguishable and contain the v	vords "Limited Liabi	lity Company," th	ne designation "LLC" or th	e abbreviation "L.L	.C."
CSWG MANAGEMENT, LLC					
A. If amending name, enter the new name o	Ü	ility company	here:		
This amendment is submitted to amend the foll	owing:				
Florida document number L17000202110	·				
The Articles of Organization for this Limited L	iability Company	were filed on	09/29/2017	and assig	gned
(Name of the Limit	ted Liability Compa (A Florida Limited)	ny as it now app Liability Company	ears on our records.) y)		
LIGHTS TONE BUSINESS GROU	•				

## 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>	Name	Address	Type of Action
MGR	JEAN R TOUZE	2719 HOLLYWOOD BLVD 237	□ Add
		HOLLYWOOD, FL 33020	■ Remove
		· · · · · · · · · · · · · · · · · · ·	☐ Change
	***************************************		□ Add
			☐ Remove
			☐ Change
<del></del>	<del> </del>		
			Remove
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<del></del>			Add
			☐ Remove
			Remove
			Change

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		<del></del>
ffective date, if other than the date of filing:	(optional)	
an effective date is listed, the date must be specific and cannot be prior to dote: If the date inserted in this block does not meet the applicable	late of filing or more than 90 days after filing.)	Pursuant to 605.02
ocument's effective date on the Department of State's records.	, <b>,,</b>	
	<b>6</b>	
e record specifies a delayed effective date, but not a The 90th day after the record is filed.	n effective time, at 12:01 a.m. o	n the earlier
FEBRUARY 27 2018	. 1	
P. A. S. C.	<u>K</u>	
13/1000		
Mynature of a member or authorize	ed representative of a member	

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Filing Fee: \$25.00