L17 000 251920

Office Use Only



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COVER LETTER

FILED COLETARY OF STATE SIXISION OF CORPORATIONS

TO: Registration Section Division of Corporations

19 DEC 19 AMII: 16

			TO CLOTY MITH
C.S.C. Fir SUBJECT:	nancial Group LLC		
	Name of Lin	nited Liability Company	
The enclosed Articles o	f Amendment and fee(s) are sub	omitted for filing.	
Please return all corresp	condence concerning this matter	to the following:	
	Ray McGhee		
		Name of Person	
	McGhee Accounting		
		Fum/Company	
	5914 Johnson St		
		Address	
	Hollywood, FL 33021		
	<u> </u>	City/State and Zip Code	
	imeghee-coa@megheeacce E-mail address:	ounting.com_ (to be used for fature annual report notif	fication)
For further information	concerning this matter, please c	rall;	
Ray McGhee		305 926-5374 at () Area Code Daytime	
Name	of Person	Area Code Daytime	: Telephone Number
Enclosed is a check for	the following amount:		
■ \$25.00 Filing Fee	S30.00 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



19 DEC 19 AM 11: 16

C.S.C. Financial Group LLC		
(<u>Name of the Limited Liabil</u> (A Florid	ity Company as it now appears on our records.) a Limited Liability Company)	
The Articles of Organization for this Limited Liability C Florida document number L17000251920	Company were filed on 12/08/2017	and assigned
his amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	nited liability company here:	
The new name must be distinguishable and contain the words "Lin	nited Liability Company," the designation "LLC" o	r the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADD	RESS)	<u></u>
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
		,
B. If amending the registered agent and/or registered agent and/or the new registered office add		enter the name of the
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Flori	da
	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>	<u>Address</u>	Type of Action
AMBR	Tania S Hali	675 NW 56th ST APT 303 Miami, FL 33127	Add
			■ Remove
		-	Change
			Add
			Remove
			Change
			☐ Remove
			☐ Change
			□ Remove
			☐ Change
			
			Remove
			☐ Change
			Add
			☐ Remove
			☐ Change

Effective date, if other than the date of filing: If an effective 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 605.033. Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a document's effective date on the Department of State's records. The specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of the 90th day after the record is filed. Dated Dated Date Signiture of a member or authorized representative of a member	_	
Effective date, if other than the date of filing:	_	
Effective date, if other than the date of filing:		
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Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00