

## Florida Department of State Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

TO: Division Fax Numb	of Corporations er : (850)617	-6383	<b>18 FEB</b> SECTUTI MULARY	- X* - -
Phone Fax Numb	Number : I2014000 ; (305)371 per : (305)371 for this business	-5758 -3178 entity to be u	23 PH 49 08 SSEE, FLORIDA for future	
annual report mailing Email Addross: PRC	driguezatt	evil address	<u>slease</u>	
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		COVER LETTER		м
TO: Registration Se Division of Corp				
CMR DOR	AL, LLC			
SUBJECT:		ited Liability Company :		
The enclosed Articles of a	Amendment and fee(s) are sub-	mitted for filing.		
Please return all correspon	ndence concerning this matter	to the following:		
	Pablo Rodriguez	Name of Design		
		Name of Person		
	Therrel Baisden, LLP		<u> </u>	
		Firm/Company		
	One S.E. 3rd Ave., Suite 2	950		·
	<u>.                                    </u>	Address		2
	Miami, Florida 33131			
		City/State and Zip Code		
	prodriguez@therrelbaisden E-mail address: (	to be used for future annual report noti	fication)	
For further information c	oncerning this matter, please c			
Pablo Rodriguez		305 371-5758 at ()		
Name o	f Person	Area Code Daytim	e Telephone Number	
Enclosed is a check for th	ne 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)	
Registr Divisio P.O. B	ING ADDRESS: ration Section on of Corporations ox 6327 assee, FL 32314	STREET/COUR Registration Section Division of Corpo Clifton Building 2661 Executive C Tallahussee, FL 3	on rations enter Circle	
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CMR DORAL, LLC		
( <u>Name of the Limited Liability Compa</u> (A Florida Limited I	any as it now appears on our records.) Liability Company)	
ment of the term of the terminal lightly for some	were filed on February 16, 2018 and assigned	
The Articles of Organization for this Limited Liability Company	were nied on and assigned	
Florida document number L18000043277		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	bility company here:	
	ere en	
The new name must be distinguishable and contain the words "Limited Liabi	ility Company," the designation "LLC" or the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:	2396 NW 96 AVE	_
(Principal office address MUST BE A STREET ADDRESS)	Doral, Florida 33172-2323	-
		-
	». ( <sup>.</sup>	
Enter new mailing address, if applicable:		-
(Mailing address MAY BE A POST OFFICE BOX)		-
B. If amending the registered agent and/or registered o	office address on our records, enter the filme of the	new
registered agent and/or the new registered office address her		
Name of New Registered Agent:		-
New Registered Office Address:	finter Florida street address	
- <u></u>	City. Florida Zip Code	
New Registered Agent's Signature, if changing Registered Agent	<u>u</u> (.	

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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 60S, 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

Page 1 of 3

## 02/23/2018 FRI 12:05 FAX

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If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records: H180000618673

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
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			Remove
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Filing Fee: \$25.00