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COVER LETTER

TO:				
CUDE		VESTMENTS, LLC		
SUBJE	:CT:	Name of Limit	ted Liability Company	
The end	closed Articles of A	Amendment and fee(s) are subn	nitted for filing.	
Please	return all correspon	ndence concerning this matter t	o the following:	
		NAPOLEON B. CORBIN	JR.	
•			Name of Person	
		CDA RE INVESTMENTS,	LLC	
			Firm/Company	
		CDA RE INVESTMENTS, LLC Name of Limited Liability Company d Articles of Amendment and fee(s) are submitted for filing. n all correspondence concerning this matter to the following: NAPOLEON B. CORBIN JR. Name of Person CDA RE INVESTMENTS, LLC Firm/Company 4986 ORTEGA BLVD Address JACKSONVILLE, FL 32210 City/State and Zip Code nbcorbin@gmail.com E-mail address: (to be used for future annual report notification formation concerning this matter, please call: N B. CORBIN JR. Name of Person Area Code Daytime Tel a check for the following amount:		
			Address	
	CDA RE INV CT: losed Articles of An eturn all correspond her information con LEON B. CORBIN Name of P	JACKSONVILLE, FL 322	10	
			City/State and Zip Code	
				
		E-mail address: (t	o be used for future annual report notific	ation)
For fur	ther information co	oncerning this matter, please ca	ll:	
NAPO	LEON B. CORBI	N JR.		
	Name of	Person	Area Code Daytime	Celephone Number
Enclos	ed is a check for th	e following amount:		
\$2.	5.00 Filing Fee		Certified Copy	□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tailahassee, 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

CDA RE INVESTMENTS, LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on $\frac{04/18/2018}{1}$ and assigned Florida document number L18000097208 This amendment is submitted to amend the following: A. If amending name, enter the new name 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 applicable: (Principal office address MUST BE A STREET ADDRESS) C/O NAPOLEON B. CORBIN JR. Enter new mailing address, if applicable: 4986 ORTEGA BLVD (Mailing address MAY BE A POST OFFICE BOX) JACKSONVILLE, FL 32210 B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: NAPOLEON B. CORBIN JR. Name of New Registered Agent: 4986 ORTEGA BLVD New Registered Office Address: Enter Florida street address , Florida 32210
Zip Code **JACKSONVILLE**

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.

City

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	CAROLINE DEAN	230 W LAKE SHORE DR	■ Add
		ROME, GA 30161	□ Remove
			☐ Change
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record specifies a delayed effective date, but not an ef	ffective time at 12:01 a.m. on the	a parlior
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ed May 3, 2018.		
ed May 3, 2018 Mapaleon B. Jacking Signature of a member or authorized rep	•	
Mapoleon B. Colin Signature of a member or authorized rep		

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00