L18000105054

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2021 DEC 10 AMII: 40 SEÇRETERY CE STATE

DEC 30 SOST

TO: Registration Division of C	Section orporations		
	WNTOWN LLC		•
	Name of Li	mited Liability Company	
The enclosed Articles of	of Amendment and fee(s) are su	ibmitted for filing.	
	nondence concerning this matte	· · · · · · · · · · · · · · · · · · ·	
	PAOLA BORNACELLI		
		Name of Person	
	CFS DOWNTOWN LLC		
		Firm/Company	
	54 W CHURCH ST, SUF	TE 150	
		Address	
	ORLANDO, FL. 32801		
	PA OLA CORROCO PRESE	City/State and Zip Code	
	PAOLA@CFSCOFFEE.C		**;* <u>*</u>
For further information of	concerning this matter, please of	(to be used for future annual report no	tification)
PAOLA BORNACELLI		407 7579510	
Name o	of Person	at ()	ne Telephone Number
		Daytii	ne retephone Number
Enclosed is a check for the	he following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addres		Street Address:	
Registration S Division of C		Registration Se	
P.O. Box 632		Division of Col The Centre of T	rporations Fallahassee
Tallabassee F	71 32314	2416 N. M.	a a a a a a a a a a a a a a a a a a a

2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

DocuSign Envelope ID: E8402787-EA73-42A6-B524-256A580C556B

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION ED **OF**

2021 DEC 10 AM 11: 40

CFS DOWNTOWN LLC

SECA-TARY OF GRATE (Name of the Limited Liability Company as it now appears on our records.)

The Articles of Organization for this Limited	Liability Company	y were filed on $\frac{04/26/201}{2}$	8 and assigned
Florida document number L18000105054			
This amendment is submitted to amend the fo	llowing:		
A. If amending name, enter the new name	of the limited lial	oility company here:	
N/A			
The new name must be distinguishable and contain the	words "Limited Liab	ility Company," the designation	on "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if appl		N/A	
(Principal office address MUST BE A STRE			
			
Enter new mailing address, if applicable:		N/A	
(Mailing address MAY BE A POST OFFICE	BOX)		
B. If amending the registered agent and/or agent and/or the new registered office addre	registered office : ess here:	address on our records,	enter the name of the new registe
Name of New Registered Agent:	N/A		
New Registered Office Address:	N/A	 	
		Enter Florida street	address
			Florida
		City	Zip Code

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 tl 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.

DocuSign Envelope ID: E84027B7-EA73-42A6-B524-256A580C556B in amenuing Authorized region(s) authorized to manage, enter the title, name, and address of each person being addor removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	GUILLERMO BERNAL	54 W CHURCH ST. SUITE 150	
		ORLANDO, FL. 32801	
MGR	MACINA COMPANIA		□Change
————	MAGDA CATALINA RICO	54 W CHURCH ST. SUITE 150	
		ORLNDO, FL. 32801	□Remove
			□Change
			□Remove
			□Change
			🗆 Add
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Effective date, if other	than the date of	f filing:		lon	tional\	
Effective date, if other fan effective date is listed, the Note: If the date inserted document's effective date	a in this block does	s not meet the appl	icable statutory fil	more than 90 days af ling requirements, t	itional) ier filing.) Pursuant to 60 his date will not be lis	5.0207 ted as
aocument s enective date	on the Departmen	nt of State's record	ls.			
		ut not an effective	time at 12:01 a.p.	an the earlier of	(b) The Ook day of	
	ed effective date, b		time, at 12.01 a.m	i. on the carrier of.	(b) The 90th day att	er the
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