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.

(((H18000251453 3)))



H180002514533ABC\$

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

To:

Division of Corporations

Pax Number : (850)617-6383

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL_INC.

Account Number : 110432003053 : (561)694-8107 Fax Number : (561)694-1639

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN CP INVESTMENT PROPERTIES, LLC

Certificate of Status	1
Certified Copy	0
Page Count	04
Estimated Charge	\$30.00

T. CLINE

AUG 28 301

EXAMINE

Electronic Filing Menu

Corporate Filing Menu

Help

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CP INVESTMENT PROPERTIES, LLC			
(Name of the Limited Liability Compan (A Florida Limited Li	y as it now appears on our records.) ability Company)	 -	
The Articles of Organization for this Limited Liability Company v Florida document number <u>L18000177044</u>	vere filed on July 23, 2018	and assigned	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabil	ity company here:	图	
COCONUT ESTERO INVESTMENT PARTNERS, LLC		73.	
The new name must be distinguishable and contain the words "Limited Liubility	y Company," the designation "LLC" or the abbre	eviotion "L.L.C."	
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)			
		<u></u>	
		F	
Enter new mailing address, if applicable:		·	
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent und/or registered officestered agent and/or the new registered office address here: Name of New Registered Agent:	ce address on our records, enter th	c name of the new	
New Registered Office Address:			
	Enter Florida street address		
Flor		da	
New Registered Agent's Signature, if changing Registered Agent:	Cip	Alp Code	
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete practice to the obligations of my position as registered agent as probeing filed to merely reflect a change in the registered office as company has been notified in writing of this change.	erformance of my duties, and I am fan ovided for in Chapter 605, F.S. Or, if	illiar with and this document is	

If Changing Registered Agent. Signature of New Registered Agent

PAGE 03/04

ţ

MGR = Manager

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

Title	<u>Name</u>	Address	Type of Action
		· · · · · · · · · · · · · · · · · · ·	
			Remove
			□ Change
			□ Remove
			□ Change
			D Add A
			Change Co
			□ Remove
			Change
	1 - 1		D Add
			Remove
			Change
			□ Remove
			C) Change

			-
		<u></u>	-
			_
	·		
		 	_
			-
		····	_
			د در حور
		• •	- (-
			~
			32
			- ·
		<u>.</u> 	-
•			
-		 -	-
_			_
			•
Tect	ve date, if other than the date of filing:		
an efi ote:	ective date is listed, the date must be specific and cannot be prior to date of filing ar more than 90 days after (Hing.). If the date inserted in this black does not meet the applicable statutory filing requirements, this date w	Parsuunt to 60 rill not be lis	5.0201 (ed as
לונוא	ent's effective date on the Department of State's records.		
	ord specifies a delayed effective date, but not an effective time, at $12:01~a,m$, o $90th$ day after the record is filed.	n the earl	er o
ated	August 27 2018		
	Mule		
	Signature of a member or authorized representative of a member		

Page 3 of 3

Filing Fee: \$25.00