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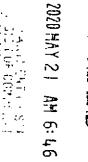
(Re	equestor's Name)	
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COVER LETTER

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	egistration Sc ivision of Cor			
614D 11272	CDS Cente	rpoint C Delray, LLC		•
SUBJECT	:	Name of Lim	ited Liability Company	
The enclos	ed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please retu	rn all correspo	ondence concerning this matter	to the following:	
		Maritza Benitez		
			Name of Person	
		CDS International Holding	s, LLC	
			Firm/Company	
		3299 NW 2nd Avenue		
		* · · · · · · · · · · · · · · · · · · ·	Address	<u> </u>
		Boca Raton, FL 33431		
		maritza.benitez@edsholdin	City/State and Zip Code	
			to be used for future annual re	port notification)
For further	information c	concerning this matter, please ca	all:	
Maritza Be	mitez		561 278-	1169
	Name o	t Person	Area Code	Daytime Telephone 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 tadditional copy is enclosed.	S60.00 Fiting Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	ailing Addres		<u>Street Add</u> Registrati	<u>ress:</u> ion Section
D	ivision of C	lorporations	Division	of Corporations
Ρ.	O. Box 632	.7	The Cent	re of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CDS Centerpoint C Delray, LLC

(Name of the Limited Liability Company as it now appears on our records.)

(A Florida Limited Liability Company)

II.1 EDITOR 1 (V)	inter thanking company)	The of the
The Articles of Organization for this Limited Liability Com	pany were filed on 12/05/2018	and assigned
Florida document number 1.18000280145		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	l liability company here:	
CDS Parks at Delray, LLC		
The new name must be distinguishable and contain the words "Limited	Liability Company," the designation "L	LC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRES	<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 of agent and/or the new registered office address here:	fice address on our records, <u>ent</u>	er the name of the new registered
Name of New Registered Agent:		
N D 1 1007 111		
New Registered Office Address:	Enter Florida street add	ress
		P12.1
	City	Florida 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.

.. amenoing 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>	Address	Type of Action
			□ Add
			□Remove
			□ Change
			□Remove
			□ Change
			□ Add
			Remove
			□Change
			Remove
			□Change
			□Add
			□Remove
			□Change
			□ Add
			□Remove
			∏Changa

). If amending a	any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	
	
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(If an effective date Note: If the date	if other than the date of filing: 5183020 (optional) e is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3) to inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the active date on the Department of State's records.
f the record specific ecord is filed.	es a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated5	18-2020
	18-2020 Signature of a member grauthorized representative of a member
	Maritza F. Beritz Typed or printed name of signee