L190000047312

| (Requestor's Name) |
|---|
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| (City/State/Zip/Phone #) |
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| (Business Entity Name) |
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SECRETARY OF STATE
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| e i n | CW BARNABEI, LLC BJECT: | | | | | | | | | |
| SU | njeC1; | | Name of Lim | ited Liability Company | | | | | | |
| The | enclosed | l Articles of . | Amendment and fee(s) are sub | mitted for filing. | | | | | | |
| Plea | ase return | all correspo | ndence concerning this matter | to the following: | | | | | | |
| | | | Christian Gendreau | | | | | | | |
| | | | | Name of Person | | | | | | |
| | | | Storey Law Group, P.A. | | | | | | | |
| | | | Firm/Company | | | | | | | |
| | Firm/Company 3670 Maguire Blvd. Ste 200 Address | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | City/State and Zip Code | | | | | | |
| | | | cgendreau@storeylawgroup | | | | | | | |
| For | further in | nformation co | n-man address: (i oncerning this matter, please co | to be used for future annual report no all: | ancationi | | | | | |
| Ch | ristian Ge | endreau | · | 407 488-1225 at () | | | | | | |
| Name of Person | | | | Area Code Daytir | me Telephone Number | | | | | |
| Enc | losed is a | check for th | e following amount: | | | | | | | |
| | \$25.00 F | iling 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) | | | | | |

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, 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 OF

| CW BARNABEI, LLC | | | | | |
|---|--|----------------------|--|--|--|
| (Name of the Limited Liability Compa (A Florida Limited | iny as it now appears on our records.) Liability Company) | | | | |
| The Articles of Organization for this Limited Liability Company florida document number <u>L19000047312</u> . | were filed on 2-22-19 | and assigned | | | |
| This amendment is submitted to amend the following: | | | | | |
| A. If amending name, enter the new name of the limited liab | oility company here: | | | | |
| The new name must be distinguishable and contain the words "Limited Liabi | lity Company," the designation "LLC" or the a | bbreviation "L.L.C." | | | |
| Enter new principal offices address, if applicable: | 11701 Orpington Street, Suite B | | | | |
| (Principal office address MUST BE A STREET ADDRESS) | Orlando, FL 32817 | | | | |
| Enter new mailing address, if applicable: | 11701 Orpington Street, Suite B | | | | |
| Mailing address MAY BE A POST OFFICE BOX) | Orlando, FL 32817 | | | | |
| B. If amending the registered agent and/or registered o registered agent and/or the new registered office address her | ffice address on our records, <u>enter</u> | 2019 OC -7 SECRETAR | | | |
| Name of New Registered Agent: | | AM 9 | | | |
| New Registered Office Address: | Enter Florida street address | A S | | | |
| | , Florida | • | | | |
| | City | 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.

If Changing Registered Agent, Signature of New Registered Agent

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

| <u>Title</u> | <u>Name</u> | <u>Address</u> | Type of Action |
|--------------|-------------------|--|----------------|
| MGR | Henry S. Barnabei | 11701 Orpington Street, Suite B Orlando, FL 32817 | ■ Add |
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| This will be a | manager-managed co | mpany. | The name a | nd address | of the man | ager is: | | |
|-------------------------|--|-------------|----------------|---------------------------------------|-----------------------|----------------|--------------------------|--------------------|
| Henry S. Barr | abei, 11701 Orpingto | n Street, | Suite B Or | lando, FL | 32817 | | | |
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| an effective date is li | ther than the date sted, the date must be sp | cific and | cannot be pri- | or to date of | filing or mor | e than 90 days | optional) after filing.) | Pursuant to 605.02 |
| | serted in this block do e date on the Departr | | | | itory' tiling i | requirement | s, this date v | viil not be listed |
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| | Signat | ure of a m | ember or au | horized rebi | esenteri e o | a member | | |
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Filing Fee: \$25.00