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(Re	questor's Name)	
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C. GOLDEN APR -2 2019

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: CVRT Investments LLC Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Jerrold Wish, Esq. Name of Person
The Wieh Law Firm
1927 NW 104th Way
Address Gainesuille, FL 32606 City/State and Zip Code
City/State and Zip Code 3 wish wishlaw. Net E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Serrold Wish at (786) 200-7077 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee Sectificate of Status S55.00 Filing Fee & Certificate of Status 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**

FILED

CVRT	Investr	nents	110	2019 MAR 22 PM 6: 38
(Name of	the Limited Liability Comp.	any as it now app	ears on our records.)	
The Articles of Organization for this L	imited Liability Company	were filed on	2/26/3	2019 and assigned
Florida document number <u>L 1900</u>	0055864.			
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 cor	ntain the words "Limited Liab	ility Company," th	e designation "LLC" of	r the abbreviation "L.L.C."
Enter new principal offices address,	if applicable:			
(Principal office address MUST BE A	STREET ADDRESS)			
Enter new mailing address, if applica				
(Mailing address MAY BE A POST O	FFICE BOX)			-
B. If amending the registered age registered agent and/or the new regis	ent and/or registered o stered office address her	ffice address <u>e</u> :	on our records, <u>s</u>	enter the name of the new
Name of New Registered Age	<u></u>			
New Registered Office Addre	<u>ss</u> :			
		Enter F	lorida street address	
		City	, Florid	la Zip Code
New Registered Agent's Signature if ch	unging Degistered Agents	•		Zip Code

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>	Name	Address	Type of Action
MGR	Robert Trenton Stephenson	14211 NW 31st. Avenue	\ Add
	3100110112011	Gainesville, FL 32606	□ Remove
			Change
			□ Add
			Remove
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•	
Effec	tive date, if other than the date of filing: (optional)
Note:	ffective date 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. If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as
docur	nent's effective date on the Department of State's records.
the re	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of
) The	90th day after the record is filed.
Dated	March 21 . 2019
	Signature of a member or authorized representative of a member
	Jerrold A. Wich, Esq, Attorney-In-fact Typed or printed name of signee
	- 11-tent

Page 3 of 3

Filing Fee: \$25.00