



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.

((H19000365642 3))



H190003656423ABC3

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
Fax Number : (850) 417-8333

From: Account Name : TAXLEAF.COM INC
Account Number : 120140006084
Phone : (305) 541-1920
Fax Number : (888) 772-8105

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
BKD MARTINS CRUZ LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

FILED
2019 DEC 19 @ 1:39
TALLAHASSEE, FLORIDA

Electronic Filing Menu

Corporate Filing Menu

Help

DEC 20 2018
T. LEMUEX

H19000365642 3

H19000365642 3
ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

BKD MARTINS CRUZ LLC

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

The Articles of Organization for this Limited Liability Company were filed on 04/08/2019 and assigned
Florida document number 119000096800

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

3111 N UNIVERSITY DR STE 105

(Principal office address MUST BE A STREET ADDRESS)

CORAL SPRINGS, FL 33065

Enter new mailing address, if applicable:

3111 N UNIVERSITY DR STE 105

(Mailing address MAY BE A POST OFFICE BOX)

CORAL SPRINGS, FL 33065

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

CSIRA LLC

New Registered Office Address:

1549 NE 125RD ST

Enter Florida street address

NORTH MIAMI

Florida 33161

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.

Adelma Duarte Pineda

If Changing Registered Agent, Signature of New Registered Agent

2019 DEC 9 PM 3:39
SUNBIZ LLC
TALLAHASSEE, FLORIDA

FILED

H19000365642 3

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>	<u>Type of Action</u>
MGR	CSI RA LLC	1549 NE 123RD ST	☒ Add
		NORTH MIAMI, FL 33161	☐ Remove
			☐ Change
AMBR	MARTINS CRUZ, JANE KELLY	300 BAYVIEW DRIVE	☒ Add
		SUNNY ISLES BEACH, FL 33160	☒ Remove
			☐ Change
AMBR	SOUZA CRUZ, CLAUDEAN	300 BAYVIEW DRIVE	☒ Add
		SUNNY ISLES BEACH, FL 33160	☒ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change

H19000365642 3

H19000365642 3

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

[illegible]

E. Effective date, if other than the date of filing: _____ (optional)

(If an effective 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 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

(b) The 90th day after the record is filed.

Dated DECEMBER 13TH 2019

Game Kelly Martins Cruz

Signature of a member or authorized representative of a member

JANE KELLY MARTINS CRUZ

Typed or printed name of signer

H19000365642 3