L19000106910

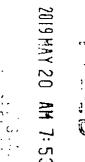
(Red	questor's Name)			
(Address)				
(Address)				
(Cit	y/State/Zip/Phone	e #)		
PICK-UP	WAIT	MAIL		
(Bu	siness Entity Nar	ne)		
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				

Office Use Only



800329390298

U5/2U/19--U1025--U04 **25.U0

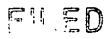


C. GOLDEN JUN - 8 2019

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Diamond B's LLC	
30 botto 1.	e 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:
Bobby Hamilto	n
	Name of Person
Diamond B's L	LC
	Firm/Company
1628 N 2nd S	t 227
	Address
Jacksonville Bea	ich FL 32250
	City/State and Zip Code
hamiltonb777@gi	
te-mail ac For further information concerning this matter, p	ddress: (to be used for future annual report notification)
of tartier mornation concerning this matter, p	166
Bobby Hamilton Name of Person	at (904) 401 - 4488 Area Code Daytime Telephone Number
Name of Person	Area Code Daytine Telephone Number
Enclosed is a check for the following amount:	
\$25.00 Filing Fee \$30.00 Filing Fee Certificate of St	
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



2019 HAY 20 AM 7: 5:

Diamond B's LLC					
(<u>Name of the Limited</u> (A	Liability Florida	Company Limited Lia	as it now appears on ou bility Company)	r records.)	
The Articles of Organization for this Limited Liab Florida document number L19000106910	bility Co	mpany w	ere filed on $\frac{4}{}$	18/19	and assigned
This amendment is submitted to amend the follow	ving:	_·			
A. If amending name, enter the new name of the	<u>he limit</u>	ed liabili	ty company here:		
CRD AFFINITY L	_L Cl				
The new name must be distinguishable and contain the wor	ds "Limit	ed Liability	Company," the designati	on "LLC" or the abb	eviation "L.L.C."
Enter new principal offices address, if applicab	ole:		7901 4th St N		_
(Principal office address MUST BE A STREET	l	ESS)	STE 300		
			St. Petersburg FL	33702	<u> </u>
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u>0x</u>)		7901 4th St N STE 300 St. Petersburg FL	33702	
B. If amending the registered agent and/or registered agent and/or the new registered office			ce address on our	records, <u>enter t</u>	he name of the nev
Name of New Registered Agent:	North	west R	egistered Agent	LLC	·
New Registered Office Address: 790		4th St	N STE 300	'	
New Registered Office Address.		Enter Florida street address			
	St. Pe	tersbu	rg	, Florida <u>33</u>	702
			City		Zip Code
New Registered Agent's Signature, if changing Reg	<u>gistered</u>	Agent:			
I hereby accept the appointment as registered provisions of all statutes relative to the proper accept the obligations of my position as registe being filed to merely reflect a change in the recompany has been notified in writing of this change in the change in writing of this change in the chan	and col ered age gistered	mplete p ent as pr	erformance of my du ovided for in Chapte	ities, and I am fa r 605, F.S. Or, ij	miliar with and Tthis document is

Page 1 of 3

If Changing Registered Agent, Signature of New Registered Agent

Type of Action
_□ Add
_□ Remove
_□ Change
_□ Add
_ Remove
_□ Change
_🗖 Add
_□ Remove
□ Change
□ Add
☐ Remove
☐ Change
 □ Add
☐ Remove
☐ Change
□ Add
□ Remove

		y never (//mae// additional sneeds, y necessary.)
_		
_		
_		
_		
_		
_		
_		
_	· · · · · · · · · · · · · · · · · · ·	
-		
_		
_		
_		
_		
	ve date, if other than the date of filing:	(optional) prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207
ote:	If the date inserted in this block does not meet the ant's effective date on the Department of State's re	applicable statutory filing requirements, this date will not be listed as
		t not an effective time, at 12:01 a.m. on the earlier of
me	90th day after the record is filed.	
ated _	May 17th . 20	W 9 .
_	0 11 11 1.	
	Toppy - Mounte	n authorized representative of a member
	Signature of a member of	authorized representative of a memoer
	Bubby Hamilton	
	Bubby Hamilton	r/printed name of signee

Filing Fee: \$25.00