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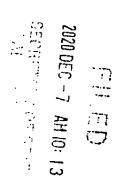
(Request	tor's Name)
(Address)	3)
(Address)	()
(City/Stat	te/Zip/Phone #)
PICK-UP	WAIT MAIL
(Business	s Entity Name)
(Docume	ent Number)
Certified Copies	Certificates of Status
Special Instructions to Filing	Officer:

Office Use Only



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COVER LETTER

TO:	Registration Sec Division of Cor			
O LIFE FEE		TONE TEAM LLC		
SUBJE	CI:	Name of Lim	ited Liability Company	
The enc	losed Articles of .	Amendment and fee(s) are sub	mitted for filing.	
Please re	eturn all correspo	ndence concerning this matter	to the following:	
		ELIZABETH VERDURA		
			Name of Person	
		CORNERSTONE TEAM	l.l.C	
			Firm/Company	
		16385 BISCAYNE BLVD	# 1504	
			Address	
	NORTH MIAMI BEACH FL 33160			
			City/State and Zip Code	
		E-mail address: (to be used for future annual report not	ification)
For furth	her information c	oncerning this matter, please c		,
ELIZAI	BETH VERDUR	Α	786 853 4004	
•	Name of	f Person	at ()	ne Telephone Number
Enclose	d is a check for th	ne following amount:		
■ \$ 25	.00 Filing 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 Addres Registration S	Section	Street Address: Registration Se	
	Division of C P.O. Box 632		Division of Co The Centre of	
	Tallahassee, h			oe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CORNERSTONE TEAM LLC				
(<u>Name of the Limite</u> (d Liability Compar A Florida Limited L	ny as it now appears (liability Company)	on our records.)	
he Articles of Organization for this Limited Lia	ibility Company	were filed on $\frac{11-26}{6}$	6-2019	and assigned
orida document number 84-3812844	·			
nis amendment is submitted to amend the follo	wing:			
. If amending name, enter the new name of	the limited liabi	ility company her	<u>e</u> :	
ne new name must be distinguishable and contain the wo	ords "Limited Liabil	ity Company," the des	ignation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:		16385 BISCAYN		2020 Sec
Principal office address MUST BE A STREET	[ADDRESS]	NORTH MIAMI	BEACH, FL 33160	<u> </u>
				-7
nter new mailing address, if applicable:		16385 BISCAYN	E BLVD #1504	
Mailing address MAY BE A POST OFFICE BOX)		NORTH MIAMI	BEACH, FL 33160	
		- -		ω
. If amending the registered agent and/or regent and/or the new registered office address Name of New Registered Agent:		uddress on our rec	eords, <u>enter the n</u>	ame of the new regis
	16385 BISCAY	NE BLVD #1504		
New Registered Office Address:		Enter Florid	la street address	
	NORTH MIAM	II BEACH	, Florida	33160
		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 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>	Address	Type of Action
			□Add
			□Remove
			[]Change
			Remove
			□Change
			□Add
			□Remove
			□Change
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ecti [.]	re date, if other than the date of filing: [12-1-2020] (optional) ctive 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 605.020
CIT	ctive 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 605.020 f the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a
	nt's effective date on the Department of State's records.
corc	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
s file	d.
	DECEMBER, 01 2020
	DECEMBER, 01 , 2020 .
ed_	
ed _	
ed _	Signature of a member of authorized representative of a member
ed .	Signature of a member of authorized representative of a member

Filing Fee: \$25.00