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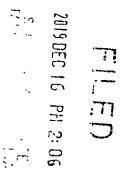
(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



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COVER LETTER

Division of Cor	porations		
SUBJECT: <u>Coli</u>	n&Cass Inves Name of Lim	tments L.L.C. ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Lyle C F	Name of Person	····
	Colin & Cass	Investments L.L.	. C
	951 Banyan	<i>Dr</i> Address	
	Hollywood	Florida 33021	
	Howell. Golding (Florida 33021 City/State and Zip Code Degrad Com to be used for future annual report notif	ication)
For further information c	oncerning this matter, please ca		
Lyle Howell	<u></u>	at $(3 \circ \mathcal{I})$ Area Code Daytime	+160
Name o	f Person	Area Code Daytime	e Telephone Number
Enclosed is a check for the	ne following amount:		
□ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address:

TO:

Registration Section

Registration Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION . OF

lity Company as it now appears on our record: la Limited Liability Company)	<u>s.</u>)
Company were filed on 12/11/2019	and assigned
nited liability company here:	
mited Liability Company," the designation "LLC"	or the abbreviation "L.L.C."
RESS)	
	20 20 20 30
ed office address on our records, enter	the name of the new registe
	PH 2
)
Enter Florida street addres:	- -
, Flo	orida Zin Code
	RESS) Enter Florida street address Florida street address

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>	Name	<u>Address</u>	Type of Action
MGR	Lyle C Howell	951 Banyan Dr. Hollywood Fl, 33021	🖾 Add
			□Remove
			■ Change
AMBR	Cassalee P Golding	951 Banyan Dr. Hollywood Fl, 33021	□Add
			□Remove
			= Change
			□Add
			□Remove
		□ Change	
			□Remove
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			□Remove
			□Change

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				<u> </u>	17-25-51, 1-2-2-2-1	
<u> </u>						
ffective date, if other than the an effective date is listed, the date motore: If the date inserted in this locument's effective date on the	ust be specific and ca block does not mee	nnot be prior to	date of filing or r le statutory filin	nore than 90 days aft	cional) er filing.) Pursuant to his date will not be	605.020 listed a
record specifies a delayed effect I is filed.	ve date, but not an	effective time	e, at 12:01 a.m.	on the earlier of: (b) The 90th day	after the
, December 11th		2019				
ated	7/1/		. •			
N/// / -	May ill					
Syle CC	Signature of a mer	nber or authori	zed representativ	of a member		-