



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

Fax Number : (850)617-6383 From: Account Name Account Number : I20100000009 Phone : (305)599-0839 Fax Number : (305)592-9591 **Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.**	Div	sion of Cor	porations		2021	
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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CF CORPORATE GROUP LLC

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

The Articles of Organization for this Limited Liability Company were filed on 12/17/2019 and assigned Florida document number L19000306695

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:	820 NE 3RD PL					
(Principal office address MUST BE A STREET ADDRESS)	HIALEAH FL 33010					120
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Enter new mailing address, if applicable:						
(Mailing address MAY BE A POST OFFICE BOX)					 	Ť
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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:	FELIX QUINTANAR PULIDO)
New Registered Office Address:	820 NE 3RD PL	
	Enur F	lorida street address
	HIALBAH	, Florida 33010
	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.

H		
I Changing	Contered Alene, Signature of New Registered Agent	

F" FY1

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 = Anthorized Member

Title	Name	Address	Type of Action
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		HIALEAH FL 33010	= = Remove
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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If the record 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 record is filed.

Dated	02-27-2021
	$\overline{\chi}$
	Signature of a member or furnorized representative of a member
	Felix Quintanar Pulido
	- Typed or printed name of signee

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