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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number : 110432003053

Phone : (561)694-8107

Fax Number : (561)694-1639

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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Certificate of Status	0
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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CMG GIV1012 LL		
(Name of the Limited Liability Compa (A Florida Limited)	iny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number	were filed on02/25/2020	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" o	r the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	4141 N.E. 2nd Ave #204-A	202
(Principal office address MUST BE A STREET ADDRESS)	Miami, FL 33137	
Enter new mailing address, if applicable:	4141 N.E. 2nd Ave #204-A	79
(Mailing address MAY BE A POST OFFICE BOX)	Miami, FL 33137	72
CHARING HALFISS WAT DE A TOOT OF TEE 2019		03
B. If amending the registered agent and/or registered office agent and/or the new registered office address here: Name of New Registered Agent:	address on our records, <u>enter th</u>	e name of the new registered
New Registered Office Address:	Enter Florida street address	
	, Flor	
	Cuy	Zip Code
New Registered Agent's Signature, if changing Registered Agent		· · · · · · · · · · · · · · · · · · ·
I hereby accept the appointment as registered agent and agreen provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered office company has been notified in writing of this change.	e performance of my duties, and provided for in Chapter 605, F.	S. Or, if this document is

If Changing Registered Agent, Signature of New Registered Agent

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	Address	Type of Action
MGR	CHEMTOV MORTGAGE GROUP CORP.	4141 N.E. 2nd Ave #204-A	
-		Miami, FL 33137	□Remove
			■ Change
			□Remove
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			C DAdd
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ate. If the date incerted in this !	e date of filing: ist be specific and cannot be prior to date of fi block does not meet the applicable statut Department of State's records.	OLA HUHE Ledan chiento, nuo gote wi	urguant to 605.020 ill not be listed a
record specifies a delayed effect is filed.	we date, but not an effective time, at 12:	01 a.m. on the earlier of: (b) The 9)Oth day after th
	2020		
March 9th			
ated March 9th	Signature of a member or authorized repre		

D.

Filing Fee: \$25.00