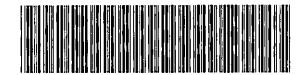
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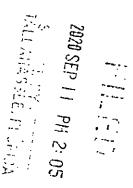
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US 10/25/20

COVER LETTER

TO: Registration S Division of Co			
	ortez LLC		
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles of	f Amendment and fee(s) are sub	omitted for filing.	
Please return all corresp	oondence concerning this matter	to the following:	
	Richard Lewis		
		Name of Person	
	Central Cortez CPU		2020
		Firm/Company	SEF
	3612 Cortez Rd W		3555 1 - 1 - 1
		Address	PH
	Bradenton, FL 34210		2020 SEP 11 PH 2: 0
		City/State and Zip Code	D) 0
	cortezshell2017@gmail.cor		
For further information	E-mail address: (concerning this matter, please c	to be used for future annual report no call:	tification)
Richard Lewis	- ,	239 777-1441	
Name	of Person	at () Area Code Daytir	ne Telephone Number
Enclosed is a check for	the following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ S60,00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addre		Street Address:	nation
Registration Division of 0	Section Corporations	Registration Se Division of Co	
P.O. Box 6327		The Centre of	Tallahassee
Tallahassee,	FL 32314	2415 N. Monro	oe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Central Cortez LLC		
(<u>Name of the Limited Liability Co</u> (A Florida Lim	ompany as it now appears on our rec nited Liability Company)	ords.)
The Articles of Organization for this Limited Liability Comp	pany were filed on July 15, 202	and assigned
lorida document number		
his amendment is submitted to amend the following:		
. If amending name, enter the new name of the limited	liability company here:	
Central Cortez CPU LLC		
he new name must be distinguishable and contain the words "Limited	Liability Company," the designation "I	
San annual and a file and demand if a multipublication		2820
nter new principal offices address, if applicable:	 	
<u> Principal office address MUST BE A STREET ADDRES.</u>	<u> </u>	127
		P. P.
nter new mailing address, if applicable:		7.00 P
Mailing address MAY BE A POST OFFICE BOX)		05
. If amending the registered agent and/or registered off ent and/or the new registered office address here:	fice address on our records, ent	er the name of the new regis
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street ada	lress
		Florida
- ,-	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 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>	<u>Name</u>	<u>Address</u>	Type of Action
			□Remove
			Change
			□ Remove
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	ust be specific and cannot be prior to date	of filing or more than 90 days afte			
Note: If the date inserted in this blocument's effective date on the I	block does not meet the applicable sta Department of State's records.	atutory filing requirements, thi	s date w	ill not b	e listed as
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record specifies a delayed effecti d is filed.	ive date, but not an effective time, at	12:01 a.m. on the earlier of: (l) The	90th day	after the
	2020				
Cambrank O	2020				
September 9					
Pated September 9	nginiture of a member or authorized re				

Typed or printed name of signee