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21 AFR 29 AN 7: 59

COVER LETTER

	stration Sec ion of Corp			
SUBJECT:	CLD SALES	SLLC		
SUBJECT		Name of Lin	nited Liability Company	
The enclosed A	Articles of A	amendment and fee(s) are sub	emitted for filing.	
Please return a	ll correspon	dence concerning this matter	to the following:	
		CRYSTAL MARTINS		
			Name of Person	 _
		CLD SALES LLC		
			Firm/Company	
		10391 SUNSET STRIP		
			Address	
		SUNRISE FL 33322		
			City/State and Zip Code	
		CRISLEE1971@YAHOO.	COM to be used for future annual report notifi	ication
For further info	ormation cor	acerning this matter, please ca		edition,
CRYSTAL MA			954 6079665	
_	Name of I	Person	at () Area Code Daytime	Telephone Number
Enclosed is a c	heck for the	following amount:		
■ \$25.00 Fili	ng 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)
	ng Address: stration Se		Street Address: Registration Sec	via.

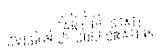
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

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TO:

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



21 APR 29 AM 7: 59

CLD SALES LLC

(Name of the Limited Liability Company as it now appears on our records.)

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registered
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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 Matorial Grant Matorial Grant Matorial Grant Matorial Grant Matorial Grant Matorial Grant Matorial Matorial Grant Matoria Grant Matorial Grant Matoria Grant Matorial Grant Matorial Grant Matorial Grant or removed from our records:

MGR = Manager AMBR = Authorized Member

21 APR 29 AH 7: 59

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR CRYSTAL MARTINS	10391 SUNSET STRIP,SUNRISE FL 33322		
			□Remove
			□Change
			🗖 Add
			□Remove
			□ Change
			□Remove
			□Change
			□Add
			□Remove
		□Change	
			□Add
	—	□Remove	
		□Change	
		□ Add	
		□Remove	
			□Change

. If ame	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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Effecti	ve date, if other than the date of filing:
Note:	ective 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 605.0207 (3)(If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the ent's effective date on the Department of State's records.
he record ord is fil	I 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 ed.
Dated	4/27/2021
Duted .	Signature of a member or authorized representative of a member
	CRYSTAL MARTINS
	Typed or printed name of signee