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21 JUN 14 PH12: 59

COVER LETTER

TO: Registration Se Division of Cor			
CJGM HO SUBJECT:	LDINGS, LLC		
SUBJECT:	Name of Lin	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
	ondence concerning this matter	-	
	ERIK ARROYO		
		Name of Person	
	BAND, GATES & DRAM	IIS, P.L.	
		Firm/Company	
	2070 RINGLING BLVD.		
	·	Address	
	SARASOTA, FLORIDA	34237	
		City/State and Zip Code	
	EARROYO@BANDGATE		
For further information o	encerning this matter, please c	to be used for future annual report noti	neation)
	oncerning this matter, please c	an;	
ERIK ARROYO		941 539-8646 at ()	
Name o	l Person	Area Code Daytim	e Telephone Number
Enclosed is a check for the	he following amount:		
■ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address Registration 9	Section	Street Address: Registration Sec	
Division of C	corporations	Division of Cor	porations

P.O. Box 6327

Tallahassee, FL 32314

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



21 JUN 14 PM 12: 59

CJGM HOLDINGS, LLC

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

The Articles of Organization for this Limited Liability Organization for this Liability Organization f	Company were filed on MAY 18, 2021	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	ited liability company here:	
The new name must be distinguishable and contain the words "Lin	nited Liability Company," the designation "L	LC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDI	RESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	d office address on our records, <u>ente</u>	er the name of the new registere
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street addi	ess
	, ,	Florida 34237
	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 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

.... ph 12: 59

		21 JUN 14	LU 17. 22
<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	WOODMAN, JAMES L.	1356 POINT CRISP ROAD	= Add
		SARASOTA, FL 34242	□Remove
			□ Change
MGR	LANDSMAN, MATTHEW	1356 POINT CRISP ROAD	□Add
		SARASOTA, FL 34242	=Remove
			□Change
			□Add
			□Remove
			□Remove
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n effectiv	re date is listed, th	ie date must be spe	ecific and	cannot be	prior to da	te of filing or	more than	(optio 90 days after	m ar) filing.) Pursua	int to 605.020	
cument`	s effective date	in this block do on the Departm	es not m ent of S	tate's reci	opiicable ords.	statutory fr	ling requir	ements, this	date will no	ot be listed a:	
ecord sp is filed.	ecifies a delaye	d effective date,	but not	an effecti	ve time, a	it 12:01 a.n	n. on the e	arlier of: (b)	The 90th	day after the	
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Filing Fee: \$25.00