Division of Corporations

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081

Phone

: (307)200-2803

Fax Number

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN CCR CREATIVE CONSULTING RESOURCES LLC

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SFP 2 9 2021

S. PRATHER

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Help

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CCR CREATIVE CONSULTING RESOURCES 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 Company were filed on $\frac{09/22/21}{2}$ Florida document number <u>L2</u>1000419411

This amendment is submitted to amend the following:

ity Company," the designation "LLC" or the abbreviation "L.L.C."
1700 W 49TH STREET
#1032
HIALEAH, FL 33012
8920 Lake Dr
#514
Doral FL 33166
iddress on our records, <u>enter the name of the new reg</u> i
Enter Florida street address

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

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	ALEXANDER GOMEZ	1700 W 49TH STREET, #1032	□Add
		HIALEAH FL 33012	□Remove
			XiChange
			🗆 Add
			□Remove
			□Change
			□Add
			□Remove
			Change
			□Add
			ElRemove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change

D. If amending any other informat	ion, enter change(s) here: (Attach additional sheets, if	necessary.)
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•		

E. Effective date, if other than the office of the date is listed, the date must Note: If the date inserted in this bloodocument's effective date on the De	t be specific and cannot be prior to date of filing or more than 90 days ock does not meet the applicable statutory filing requirements	optional) safter filing.) Pursuant to 605.0207 (3)(b) s, this date will not be listed as the
If the record specifies a delayed effective record is filed.	e date, but not an effective time, at 12:01 a.m. on the earlier of	of: (b) The 90th day after the
Dated 09/28		PILED 2021 SEP 28 PM 1: 38 SECRETARY OF STATE FALLAHASSEE, FLORIDA
Riluy Park	Signature of a member or authorized representative of a member	P 28 PH TARY OF ASSEE, F
Riley Park		M I: 3
	Typed or printed name of signee	₩ %

Filing Fee: \$25.00