## L21000454043

(Re	equestor's Name)	
(Ad	dress)	-
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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## **COVER LETTER**

	Registration Se Division of Cor				
SUBJEC		ellness LLC			
NOBIEC	·	Name of Lim	ited Liability Company		
The enclo	sed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please ret	urn all correspo	ndence concerning this matter	to the following:		
		Filing MichaelD			
			Name of Person		
		ZenBusiness Inc.			
		·	Firm/Company	<del></del>	207
		336 E College Ave, Ste 30	1		orzision ar co 2023 OCT 17
			Address		7 - T
		Tallahassee, FL 32301			17 PM 12: 40
			City/State and Zip Code	,	2: <u>4</u>
		fulfillment@zenbusiness.co	m to be used for future annual report notifi	anti an l	<b>o</b> ∴
For furthe	er information co	oncerning this matter, please ca		cationy	
Filing Mi	chaelD c/o Zen	Business Inc.	844 493-6249 at()		
	Name o	f Person		Telephone Number	<del></del>
Enclosed	is a check for th	ne following amount:			
■ \$25.0	0 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified C	of Status &
	Mailing Addres Registration 5		Street Address: Registration Sect	tion	

Division of Corporations 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

Dat orta Wenness L.E.	
(Name of the Limited Liability Company as it now ap (A Florida Limited Liability Compa	pears on our records.) ny)
The Articles of Organization for this Limited Liability Company were filed on Florida document number $\frac{1.21000454043}{1.21000454043}$ .	01/01/2022 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability compan	y here:
Capital D Investments LLC	
The new name must be distinguishable and contain the words "Limited Liability Company," a	the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	2023
	100 100 100 100 100 100 100 100 100 100
Enter new mailing address, if applicable:	7 PH
(Mailing address MAY BE A POST OFFICE BOX)	# 12: 4 10: 4
(Mining minings) M. IT BENTY OST OFFICE BON	<b>5</b> 37
B. If amending the registered agent and/or registered office address on or	ir records, <u>enter the name of the new regist</u>
agent and/or the new registered office address here:	
Name of New Registered Agent:	
New Registered Office Address:	
	Florida street address
	, Florida
C'ity:	Zin 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 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, <u>enter the title, name, and address of each person\_being ad or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	<u>Address</u> <u>T</u>	vpe of Action
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Effective date, if other than the If an effective date is listed, the date mu Note: If the date inserted in this bedocument's effective date on the I	lock does not mee	4 the applicable s	of filing or more that atutory filing requi	(optional) 190 days after filing.) rements, this date v	Pursuant vill not t	to 605.02 be listed :
e record specifies a delayed effecti rd is filed.	ve date, but not an	effective time, at	12:01 a.m. on the	carlier of: (b) The	90th da	y after th
Dated October 5						