L2200009655H

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T. MATTHEWS MAR 31 2022

COVER LETTER

TO:

TO: Registration Se Division of Cor			
CBC & CO	LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	BRITTENY FELIX		
		Name of Person	
	CBC & CO LLC		
		Firm/Company	
	P.O. BOX 1414		
		Address	
	FORT MYERS, FL 33902		
		City/State and Zip Code	 · - · - · - · - · - · - · - · - · · - · · · · · · · · · · · · · · · · · · · ·
	CBCANDCOMPANY@GI		
For further information o	E-mail address: (concerning this matter, please or	to be used for future annual report no	tification)
BRITTENY FELIX		239 7448738	
Name o	f Person	at () Area Code Daytin	me Telephone Number
Enclosed is a check for the	he following amount:		
■ \$25.00 Filing Fec	☐ \$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)
Mailina Adday		Street Address:	
Mailing Address: Registration Section		Registration S	ection
Division of Corporations		Division of Co	orporations
P.O. Box 632		The Centre of	
Tallahassee, 1	FL 32314	2415 N. Monr	oe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(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 2/23/2022 and assigned Florida document number L22000096854 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address ____. Florida ____

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.

City

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>	Address	Type of Action
MGR	BRITTENY FELIX	3660 CENTRAL AVE	≅ Add
		STE ID	□Remove
		FORT MYERS, FL 339	□ Change
			□Remove
			□Change
			□Add
			□Remove
			Change
			□Remove
			□Change
			□Remove
			Change
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			□Change

			
		 	
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ective date, if other than th	e date of filing: 2/22/2022	(optional)	
effective date is listed, the date m	ust be specific and cannot be prior to d	ate of filing or more than 90 days after filing.) Pr	
	Department of State's records.	e statutory filing requirements, this date wi	ii not be listed as
	ive date, but not an effective time,	at 12:01 a.m. on the earlier of: (b) The 9	Oth day after the
s filed.			
MARCH 16	2022		
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1/ 1	/		

Typed or printed name of signee