LZZ000161 142

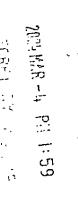
<u> </u>		
(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	#)
_		
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
		İ
	3-4-	24
·	<u> </u>	

Office Use Only



700422635777

01/26/24--01010--009 **25.00



TO: Registration Se Division of Cor			
C. EUGEN	NE ENTERPRISES, LLC		
	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	indence concerning this matter	to the following:	
	CHRISTOPHER EUGENE	E	
	-	Name of Person	
	C. EUGENE ENTERPRI	ISES, LLC	
		Firm/Company	
	601 BRICKELL KEY D	DRIVE SUITE 700	2024) SEC
	MIAMI, FL 33131	Address	2024 HAR -4 SECRETALL
	MRCHRISEUGENE@GMAI	City/State and Zip Code L . COM	fication)
		to be used for future annual report noti	fication)
	oncerning this matter, please c		
CHRISTOPHER EUGE	NE	305 542-0195	
Name o	f Person	Area Code Daytim	e Telephone Number
Enclosed is a check for the	ne 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 Addres		Street Address:	
Registration S		Registration Sec Division of Cor	
Division of C	•	The Contra of T	

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

DocuSign Envelope ID: 23B4D80C-470B-4C2F-B076-33043AF75C26

TARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

C. EUGENE ENTERPRISES, LLC		
(<u>Name of the Limited Liability C</u> (A Florida Lin	ompany as it now appears on our records.) nited Liability Company)	
The Articles of Organization for this Limited Liability Com L22000161142 Florida document number	pany were filed on	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	liability company here:	
CM EUGENE ENTERPRISES LLC		
The new name must be distinguishable and contain the words "Limited	Liability Company," the designation "LLC" of	r the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	_	
Principal office address MUST BE A STREET ADDRES	<u></u>	~
		<u></u>
		WAR TAR
Enter new mailing address, if applicable:		1
Mailing address MAY BE A POST OFFICE BOX)	-	
		T. 01
B. If amending the registered agent and/or registered of agent and/or the new registered office address here:	fice address on our records, <u>enter th</u>	e name of the new registe
Name of New Registered Agent:		
New Registered Office Address:		
The Wind State Control	Enter Florida street address	
	. Flori	ida
	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 Changing Registered Agent, Signature of New Registered Agent

DocuSign Envelope ID: 23B4D80C-470B-4C2F-B076-33043AF75C26 in amending Authorized rerson(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>	Name	Address	Type of Action
			□Add
			Remove
			Change
			
			Remove
			2024 DAdd
			Kemove
			一
			Remove
			Change
			□Add
			Remove
			□Change
			□Add
			□Remove
			Change

	
	
2021 3E	
ALL HAR	}
259	
	<u>o</u>
TV.	<u></u>
	و

Filing Fee: \$25.00