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SECRETARY OF STATE
TALLAHASSEE, FL

COVER LETTER

TO: Registration Section Division of Corporations	·
SUBJECT: CDW Knopent I	ted Liability Company
The enclosed Articles of Amendment and fee(s) are subm	mitted for filing.
Please return all correspondence concerning this matter to	to the following:
DONALD	Name of Person
CDN Prop	Firm/Company
S644 Corp	Address
	Seach, FL 33407 City/State and Zip Code
CHARLES FE	to be used for future annual report notification)
For further information concerning this matter, please ca	all:
CHARLES TERMANDEZ Name of Person	at (Sud) 478-1846 Area Code Daytime Telephone Number
Enclosed is a check for the following amount:	
\$25.00 Filing Fee Solution San San San Status	☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee, Certified Copy Certificate of Status & (additional copy is enclosed) Certified Copy (additional copy is enclosed)
<u>Mailing Address:</u> Registration Section	Street Address: Registration Section
Division of Corporations	Division of Communition 20 8

Registration Section 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

POZZ SEP - 1 MM 9: 23 ECRETARY OF STATE

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

	I.		$S_{ij} = S_{ij}$	
			TACE TACE	-
CDN Property In	ntesus	11.24mg		
(Name of the Limited Liability Compar (A Florida Limited L	ay as it now appears	on our records.)	生品	9
(AT ROTAL DAMES 1)	monny company)		20 2	
The Articles of Organization for this Limited Liability Company	were filed on	4/12/2022	alid assign	icd 💟
Florida document number <u>L22000175127</u>			3: 23 FL	
This amendment is submitted to amend the following:			• • •	
A. If amending name, enter the new name of the limited liabi	lity company her	<u>-e</u> :		
The new name must be distinguishable and contain the words "Limited Liabili	ity Company," the de	signation "LLC" or the	abhreviation "L.L.C	·
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 a	iddress on our re	cords, <u>enter the na</u>	me of the new r	egistered
agent and/or the new registered office address here:				
Name of New Registered Agent:				
New Registered Office Address:				
	Enter Flori	da street address		
		Florida _		
	City		Zip Code	
New Registered Agent's Signature, if changing Registered Agent:				
I hereby accept the appointment as registered agent and agre				

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

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
uns	MicHolis Heine	847 W 13th Court Svitel Reach FL 3340	Add
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			🗆 Add
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If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
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SEE'S S	
デック	
Effective date, if other than the date of filing:	i)(b) ic
the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the cord is filed.	
Dated August 27 . 2027	
Signature of a member of authorized representative of a member	
Typed or printed name of signee	

Filing Fee: \$25.00

Electronic Articles of Organization For Florida Limited Liability Company

L22000175127 FILED 8:00 AM April 12, 2022 Sec. Of State sjkurisko

Article I

The name of the Limited Liability Company is: CDN PROPERTY INVESTMENTS LLC

Article II

The street address of the principal office of the Limited Liability Company is:

5644 CORPORATE WAY WEST PALM BEACH, FL. 33407

The mailing address of the Limited Liability Company is:

5644 CORPORATE WAY WEST PALM BEACH, FL. 33407

Article III

The name and Florida street address of the registered agent is:

DONALD CAMERON 5644 CORPORATE WAY WEST PALM BEACH, FL. 33407

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Registered Agent Signature: DONALD CAMERON

Article IV

The name and address of person(s) authorized to manage LLC:

Title: MGR DONALD CAMERON 5644 CORPORATE WAY WEST PALM BEACH, FL. 33407 L22000175127 FILED 8:00 AM April 12, 2022 Sec. Of State sjkurisko

Article V

The effective date for this Limited Liability Company shall be:

04/12/2022

Signature of member or an authorized representative

Electronic Signature: DONALD CAMERON

I am the member or authorized representative submitting these Articles of Organization and affirm that the facts stated herein are true. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of the LLC and every year thereafter to maintain "active" status.