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(shown below) on the top and bottom of all pages of the document.



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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 : (855)330-1010

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address:

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

## CFL INTERNATIONAL LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION \* OF

٠,

CFL International LLC			
(Name of the Limited Liability Company as it now ap (A Florida Limited Liability Compar	pears on our records.) (1y)	1, 10, 10, 10, 10, 10, 10, 10, 10, 10, 1	
The Articles of Organization for this Limited Liability Company were filed on Florida document number L22000385074		and assign	ned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liability company	<u>: here</u> :		
The new name must be distinguishable and contain the words "Limited Liability Company," t	he designation "LLC" or the	abbreviation "L.E.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 address on ou agent and/or the new registered office address here:	<del></del>	ame of the new ro	<u>egiste</u>
Name of New Registered Agent:			
New Registered Office Address:  Enter	Florida street address	- <del>-</del> ;	; <u>.</u>
Cuy	Florida	Zip Cords	
Naw Dogistored 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	Suganthan Anmasalam Rajenthiran	8450 Garden Cir	Z Add
		Apt 9	CIRemove
		Sarasota FL 34243	Change
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			□Change
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Effective date, if other than the d	ate of filings		(optional)	
If an effective date is listed, the date must b Note: If the date inserted in this bloc document's effective date on the Dep.	e specific and cannot be prior to k does not meet the applicab		0 days after filing,) Pursuant to	
e record specifies a delayed effective of the is filed.	late, but not an effective time	e, at 12:01 a.m. on the ea	rlier of: (b) The 90th day a	ifter the
<sub>Dated</sub> January 20	. 2023	. •		
		A Company		

Filing Fee: \$25.00