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	COVER LETTER	
TO: Registration Section Division of Corporations		
CJM Holdings Deland-Garfiel	d LLC	
SUBJECT:	Name of Limited Liability Company	
The enclosed Articles of Amendment and fe	e(s) are submitted for filing.	
Please return all correspondence concerning	this matter to the following:	
Thomas A Hav	vkins	
	Name of Person	
Flint Land LLC		
	Firm/Company	
414 Jennie Jew	el Dr	
	Address	
Orlando, FL 32	806	
	City/State and Zip Code	
Sowega1986@g	nail.com all address: (to be used for future annual report notification)	
For further information concerning this matter	·	
-		
Thomas A Hawkins	407 353-7211 at () Area Code Daytime Telephone Number	
Name of Person	Area Code Daytime Telephone Number	
Enclosed is a check for the following amour		
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■ \$25.00 Filing Fee		
Mailing Address:	Street Address:	
Registration Section Division of Corporations	Registration Section Division of Corporations	
P.O. Box 6327	The Centre of Tallahassee	
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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CJM Holdings Deland-Garfield, LLC

(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 $\frac{09/21/2022}{1}$ Florida document number L22000411998 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 "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 address on our records, enter the name of the new registered agent and/or the new registered office address here: Flint Land LLC Name of New Registered Agent 414 Jennie Jewel Dr. New Registered Office Address Enter Florida street address , Florida 32806 Zip Code Orlando

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

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	Thomas A Hawkins		414 Jennie Jewel Dr. Orlando, FL 32806	∃ Add
				□Remove
				□Change
		<u> </u>		□Add
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				□Add
				□Remove
				□Change

D. If amending any other information	enter change(s) here: (Attach additional sheets, if necessary.)
E. Effective date, if other than the dat (If an effective date is listed, the date must be Note: If the date inserted in this block document's effective date on the Depar	e of filing:
record is filed.	e, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated OCTOBER	12 . 2072.
Sign	nature of a member or authorized representative of a member
	Typed or printed name of signee

Filing Fee: \$25.00