L22000423116

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





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2023 OCT 27 AM 9: 32

RECEIVED

FLORIDA CAPITAL COURIE	R SERVICES, INC
2330 CLARE DRIVE TALLAHASSEE, FL 32309	
(850) 524-5437	
(850) 524-6243	
Please use funds from this ac	
Authorization Signature:	Jon Gellen
Cash Cow Capital LLC	
Business Name	Doc. #
Dusiness Name	D00. 11
Certified Copy	
∠ Certificate of Status	
NEW FILINGS	<u>AMENDMENTS</u>
Profit Corp	X Amendment
Not for Profit	Resignation of R.A. or
	Office or Director
Limited Liability	Change of Registered Agent
Domestication	Revocation of Dissolution
Other	Merger
CORP LLLP	Conversion Amended and restated Articles
LLL	Statement of Authority
OTHER FILINGS	REGISTERATION/QUALIFICATIONS
	REGISTERATION/QUALIFICATIONS
Annual Report	Foreign filing
	Limited Partnership
Fictitious Name	Reinstatement
APOSTILLE	Other
Country	

EXAMINIER'S INITIALS:____

COVER LETTER

TO: Registration So Division of Cor			
eun ieze.	CASH COW	CAPITAL 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:	
	Mauricio Rauld		
		Name of Person	
	Premier Law Group		
		Firm/Company	
	1810 S. El Camino Re	·· ····	
		Address	
	San Clemente, CA 92	672	
		City/State and Zip Code	
	CS@PLGLP.COM	to be used for future annual report noti	tiention
For further information of	concerning this matter, please c		nearony
Mauricio Rauld		at (_310) _ 307-606	30
Name o	of Person	Area Code Daytim	e Telephone Number
Enclosed is a check for t	he 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 Addre	Section	Street Address: Registration Se	
Division of C P.O. Box 632	•	Division of Cou	
Tallahassee.			e Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

		APITAL LLC	2023 OC	T 27 AM 9: 32
(Name of the Limited	Liability Compa A Florida Limited 1	ny as it now appears of liability Company)	TALLAHA	ASSEF, FLAGIA
The Articles of Organization for this Limited Lia lorida document number L2200042311		were filed on	09/30/2022	and assigned?
his amendment is submitted to amend the follow	wing:			
A. If amending name, enter the new name of	the limited liab	ility company here	:	
he new name must be distinguishable and contain the wo	ords "Limited Liahi	lity Company," the desig	enation "LLC" or the ab	breviation "L.L.C."
			St., Ste C9 #8006	
Enter new principal offices address, if applica Principal office address MUST BE A STREET		Miami, FL 3328		
Enter new mailing address, if applicable:		3858 NE 207th	St., Ste C9 #8006	310
Mailing address MAY BE A POST OFFICE BOX		Miami, FL 3328	30	
B. If amending the registered agent and/or re agent and/or the new registered office addres:	egistered office s here:	address on our reco	ords, <u>enter the nam</u>	e of the new registere
Name of New Registered Agent:	Registered /	Agents, Inc.		
New Registered Office Address:	7901 4th St	reet N., Suite 300 Enter Floride	a street address	_
	St. Petersbu	urg	, Florida	33702
		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.

David Soberts

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
			□ Add
			□Remove
			□ Change
			□Add
			□ Remove
			□Change
			□Add
			Remove
			□Change
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					LANASSEE, FLORIDA	9: 32
-					<u>Dr:</u>	
				<u></u>	<u></u> -	
reffective <u>te:</u> If the	ate, if other than the da date is listed, the date must be e date inserted in this block effective date on the Depa	specific and cannot be prior does not meet the applic	to date of filing or more table statutory filing r	than 90 days after equirements, this	filing.) Pursi	uant to 605.020 not be listed a
cord spe s filed.	cifies a delayed effective d	te, but not an effective t	ime, at 12:01 a.m. on	the earlier of: (b) The 90th	h day after th
ed	October 23	, 2023	auld S			
-	Sig	nature of a member of auth	orized representative of	a member		