

6/12/24, 11:37 AM

Division of Corporations

## Florida Department of State

Division of Corporations  
Electronic Filing Cover Sheet

**L22000450601**

**22000450601**

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To:

Division of Corporations  
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Account Name : CYAN CONSULTANTS INC.  
Account Number : I20180000074  
Phone : (321)710-2030  
Fax Number : (407)650-3216

24 JUN 12 PM 2:12

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**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN**  
**CAMESCA LAND GROUP LLC**

Certificate of Status	0
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M. SOLOMON

JUN 12 2024

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: CAMESCA LAND GROUP LLC**

\_\_\_\_\_  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

CAROLINA BERMUDEZ PELAEZ

\_\_\_\_\_  
Name of Person

CAMESCA LAND GROUP LLC

\_\_\_\_\_  
Firm/Company

2949 FALLING TREE CIRCLE

\_\_\_\_\_  
Address

ORLANDO, FL 32837

\_\_\_\_\_  
City/State and Zip Code

DOCUMENTS@CYANCINC.COM

\_\_\_\_\_  
E-mail address; (to be used for future annual report notification)

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RECEIVED  
JUN 12 2024  
CYAN CONSULTANTS INC.

For further information concerning this matter, please call:

CAROLINA BERMUDEZ PELAEZ

321

301-2918

at (\_\_\_\_\_) \_\_\_\_\_

\_\_\_\_\_  
Name of Person

\_\_\_\_\_  
Area Code

\_\_\_\_\_  
Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &  
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(additional copy is enclosed)

**Mailing Address:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CAMESCA LAND GROUP 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 10/19/2022 and assigned  
Florida document number L22000450601.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

NO CHANGE

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:

NO CHANGE

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

NO CHANGE

(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:**

Name of New Registered Agent:

NO CHANGE

New Registered Office Address:

*Enter Florida street address*

*City*

**Florida**

*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**

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>	<u>Address</u>	<u>Type of Action</u>
MGRM	MANUEL ESCALANTE FORERO	2949 FALLING TREE CIRCLE	<input checked="" type="checkbox"/> Add
		ORLANDO, FL 32837	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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