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-	(Requesi	tor's Name)		
	(Address	5)		
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PICK-UP	[WAIT		MAIL
	(Busines	s Entity Name	e)	
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Certified Copies		Certificate	s of Statu	s
Special Instructions to	Filing Of	ficer:		

Office Use Only



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2023 SEP 22 PH 12: 40



CORPORATION SERVICE COMPANY
1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195	
REFERENCE : 014231 7501547	
AUTHORIZATION: Sixualle man	
COST LIMIT : \$25.00	
ORDER DATE : September 22, 2023	-
ORDER TIME: 1:20 PM	038 C
ORDER NO. : 014231-005	Ş
CUSTOMER NO: 7501547	
DOMESTIC AMENDMENT FILING NAME: 252 BANYAN LLC	ਹੈ. - o
EFFECTIVE DATE:	
XX ARTICLES OF AMENDMENT RESTATED ARTICLES OF INCORPORATION	
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:	
CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING	
CONTACT PERSON: Eyliena Baker EXT#	

EXAMINER'S INITIALS:

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

252 Banyan 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 ______ 23, 2023 __ and assigned Florida document number ____L23000058468 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: CV Acquisitions LLC 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 fegistered agent and/or the new registered office address here: Corporation Service Company Name of New Registered Agent: 1201 Hays Street New Registered Office Address: Enter Florida street address Tallahassee ___, Florida 32301 Zip Code Cirv

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.

CORP	Eyling Baket:
By:	Constant Vice Prinshipt
Name:	Eyliena Baker
Title:	Assistant Vice President

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
AR	David Brody	4401 Fairfax Drive, Suite 800	≣Add
		Arlington, VA 22203	□Remove
			Change
			□Add
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		 	2023 SEP 202 PHee Change: 40
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E. Effective	date, if other than the dive date is listed, the date must b	ate of filing: be specific and cannot be prior t	o date of tiling or more than 9	(optional) 0 days after filing.) Pursuant to 60)5.0207 (3)(b
Note: If t	the date inserted in this bloc 's effective date on the Dep	k does not meet the applica	ble statutory filing require	ments, this date will not be lis	ited as the
If the record sprecord is filed.		date, but not an effective tin	ne, at 12:01 a.m. on the ca	rlier of: (b) The 90th day aft	er the
DatedSe	ptember 20	2023			
		1/1/1	- 1		
		furtiture of a member or author			

Filing Fee: \$25.00

Typed or printed name of signee