L23000|03632

(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	

Office Use Only



800407383718

04/26/23--01019--011 **150.00

2023 AFR 26 PH 4: 20

COVER LETTER

	Registration : Division of C				
CHD ICA		nagement Services, LLC			
SUBJEC		Name of Lim	nited Liability Company		
The encl	osed Articles (of Amendment and fee(s) are sub	omitted for filing.		
Please re	turn all corres	pondence concerning this matter	to the following:		
		Cari-Ann Brana			
			Name of Person		
		<u></u>	Firm/Company		
		8724 Sunset Drive, #96			
			Address	, ,	303
		Miami, Florida 33173		į · Ž	GOM FORC
		51 1 051	City/State and Zip Code	T	λ ()
		faburocks@faburocks.com	to be used for future annual report noti		
For furth	er information	concerning this matter, please c		•	
Car-Ann	Brana		305 952-0079 at ()	<u>m</u>	\Box
	Name	e of Person		e Telephone Number	
Enclosed	l is a check for	the following amount:			
≘ \$2 5.	00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
	Mailing Addr Registration		<u>Street Address:</u> Registration Sec	ction	
	_	Corporations	Division of Cor		
	P.O. Box 63		The Centre of I	allahassee	
	Tallahassee	, FL 32314	2415 N. Monro	e Street, Suite 810	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Compa (A Florida Limited I	nv as it now appears on our reconiability Company)	ords.)
The Articles of Organization for this Limited Liability Company Florida document number <u>L23000103632</u>	were filed on 2/27/23	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "L	.L.C." or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		. 2
(Principal office address MUST BE A STREET ADDRESS)		23 fPR 26
Enter new mailing address, if applicable:		P
(Mailing address MAY BE A POST OFFICE BOX)		1: 20 LE
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our records, <u>ent</u>	ter the name of the new registere
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street add	Iress
		Florida
New Designation of Association (Colored to Colored to C	•	Zip Code
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agre provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p	performance of my duties.	and I am familiar with and

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>	Name	Address	Type of Action
MGR	CRB Family Limited Partnership, L	8724 SUNSET DRIVE, #96	
		MIAMI, FL 33173	■Remove
			Change
MGR	CRB Family Partnership, LLLP	8724 SUNSET DRIVE, #96	
		MIAMI, Fl. 33173	□Remove
			Change
			OAdd
			□Rêmiove
			Change
			□Remove
			Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change

	···		
	·		
			
	 		
			
			
		····	
fective date, if other than the d	ate of filing:	(0)	ntional)
n effective date is listed, the date must b	se specific and cannot be prior to date of	filing or more than 90 days a	ofter filing.) Pursuant to 605.0
ote: If the date inserted in this bloc cument's effective date on the Dep	k does not meet the applicable statu partment of State's records.	itory filing requirements.	this date will not be listed
·			
ecord specifies a delayed effective	date, but not an effective time, at 12	2:01 a.m. on the earlier of	(b) The 90th day after
is tiled.			·
April 12	2023		
ted April 12	. 2023		29:
Cairlinbara			2927 APH 26
S	ignature of a member or authorized rep	resentative of a member	<u>.</u>
-			200
Cari-Ann Brana			

Filing Fee: \$25.00