592141 000 ESJ

(Req	juestor's Name)	
(Add	lress)	
(Add	lress)	
(City	/State/Zip/Phone	; #)
	WAIT	MAIL
(Bus	iness Entity Nam	ne)
(Doc	ument Number)	
Certified Copies	Certificates	of Status
Special Instructions to F	iling Officer:	
	Office Use Onl	



04/20/23--01015--013 ++25.00



COVER LETTER

.

TO: **Registration Section Division of Corporations**

CWN PROPERTIES LLC _____

SUBJECT: ____

۰.

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:

	Juan Blandino			
	·····	Name of Person		-
	J. Perez Legal, PA			
	·- ·	Firm/Company		
	9710 Stirling Rd. Suite 104	41-05		
	Cooper City, FL 33024	Address		22 242 EM
		City/State and Zip Code	·····	· · · · · · · · · · · · · · · · · · ·
	bleyva@jjplegal.com			
For further information e Berenice Levva	n-mail address: t	to be used for future annual report notif all: 954 450-2585	icanon)	
	fPerson	at ()	Telephone Number	
Enclosed is a check for th S25.00 Filing Fee	he following amount; □ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	ite of Status &

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

CWN PROPERTIES 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 03/20/2023	and assigned
Florida document number L23000141692	
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 "LLC."

Enter new principal offices address, if applie	able:			
(Principal office address MUST BE A STREE	ET ADDRESS)			
Enter new mailing address, if applicable:			10,000 AA (2012	
(Mailing address MAY BE A POST OFFICE	<u>BOX)</u>	 -		
B. If amending the registered agent and/or a agent and/or the new registered office addre		ords, <u>enter the na</u>	me of the new	v registered
Name of New Registered Agent:	SANCHEZ. CROMER		,, (D	
New Registered Office Address:	17628 SW 46 ST	·		
	Enter Florid	la street address		
	MIRAMAR	, Florida	33029	
	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.

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	<u>Type of Action</u>
AMBR	SANCHEZ, CROMER	17628 SW 46 ST	□ Add
		MIRAMAR, FL 33029	
			□Change
MGR	SANCHEZ, CROMER	17628 SW 46 ST	
		MIRAMAR, FL 33029	🖾 Remove
		ز ۲۰۰۰ ۱۹۹۹ - ۲۰۰۰ ۱۹۹۹ - ۲۰۰۰ ۱۹۹۹ - ۲۰۰۰ ۱۹۹۹ - ۲۰۰۰ ۱۹۹۹ - ۲۰۰۰	Change
			Remove
			□Change
			🖸 Add
			□ Change
			🗆 Add
			🖸 Remove
			□Change
			🖸 Add
			□ Remove
			□Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

•

.

					_
· · · · ·		·			-
					_
	 ••••				_
	 				_
	 · · · · · ·				<u> </u>
				~- >	
	 				_
				·	
					11
			1 * F.	2023 APX 20	
				N N	<u>, :</u>
	 			<u> </u>	_
			· · · · · · · · · · · · · · · · · · ·		··
			::	-0	÷.,
			-	<u>-9</u>	
	 				, , '
			• .	65	
				<u>ှ ယ</u>	
	 -	-	•		_
····-	 				_

E. Effective date, if other than the date of filing: _________(optional) (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

D. April 11	2023	
Dated		

Signature of a member or authorized representative of a member

CROMER SANCHEZ

Typed or printed name of signee