L23000241299

(Requ	estor's Name)	
(Addre	255)	
(**************************************	,	
(Addre	ess)	
100.00	7: (7)	40
(City/S	state/Zip/Phon	e #)
PICK-UP	MAIT	MAIL
(Busin	ess Entity Nai	me)
(Docu	ment Number)	
Certified Copies	Certificates	s of Status
Special Instructions to Fili	ng Officer:	

Office Use Only



100418282441

11/03/23--01015--010 ++43.75





November 9, 2023

MARCUS CLOCHES DA SILVA 4425 AZURE ISLE WAY KISSIMMMEE, FL 34744

SUBJECT: CWB INVESTMENT, LLC

Ref. Number: L23000241299

We have received your document for CWB INVESTMENT, LLC and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a Florida Profit Corporation, but your entity is a LLC. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Morgan E Lovett
Regulatory Specialist II

Letter Number: 823A00026149

1 1 7 2 1 2020

COVER LETTER

TO:

Tallahassee, FL 32314

TO: Registration Se Division of Cor			
SUBJECT:	B Investmen Name of Limi	t LLC	
	Name of Limi	ted Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub-	nitted for filing.	
Please return all correspo	ondence concerning this matter t	to the following:	
	MARCUS	V. CLOCHES DE	ASILVA
	<u></u>	ENVESTMENT, L	ic
	4425 AZ	CURE ISLE WA	<u> </u>
	KISSIMM	City/State and Zip Code	244 :
	CWS. INVES	STMENTUSA @ CO	NATLOM ification)
For further information c	oncerning this matter, please ea	all:	·
MAPOS CO	WCHES DA SIL	VA at (<u>407)</u> <u>408</u> Area Code Daytin	ZUOUne Telephone Number
Enclosed is a check for the	he following amount:		
□ \$25.00 Filing Fee		☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address Registration	Section	<u>Street Address:</u> Registration Sc	
Division of C P.O. Box 632		Division of Co The Centre of	•

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limite	VESTON d Liability Compa A Florida Limited I	でんて しし ny as it now appears on ou liability Company)	ır record <u>ş.</u>)	
Florida document number <u>LZ3COOZ</u> 41		were filed on		and assigned
This amendment is submitted to amend the follow	wing:			
A. If amending name, enter the new name of	the limited liab	ility company here:		
The new name must be distinguishable and contain the wo Enter new principal offices address, if applica (Principal office address MUST BE A STREET	ıble:	1.6		oreviation "L.L.C."
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE E	<u>30X)</u>	NA		
B. If amending the registered agent and/or re agent and/or the new registered office address		address on our record	s, enter the name	e of the new registered
Name of New Registered Agent:	BR161	TH PATING) CASTE	-0 -
New Registered Office Address:	4425	AZUPE ISU Enter Florida stre		<u> </u>
	KIS	SIMMEE City	, Florida	34744 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	Type of Action
AMBR	BRIGHTH PATINO (AS	(AUFUE) (2126-WA)	<u>√</u> Øj∧dd
		, , ,	
			□Change
			□Add
			□Remove
			□Change
			🗆 Add
			□Remove
			, □Change :
			_ □Add r
			□Remove Ţ
			□Change
			🗀 Add
			□Remove
			□Change
			□Add
			□Remove
			□ Channa

APPING AN ADDITIONAL MEMBER TO THE COMP	ANY.
BRIGITH PATINO CASTRO	
MEMBER I OWNER MARCUS V. CLOCHES DA SIL	. <u>v A</u>
Has 90% OWNERSHIP OF THE COMPANY.	
AND MEMBER (NEW) BRIGITH PATINO C	ASTRO
HAS 10% CONNERSHIP.	
	
	•
ctive date, if other than the date of filing: (optional) 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 (1
E: If the date inserted in this block does not meet the applicable statutory filing requirements, this date with inserting the date on the Department of State's records.	ill not be listed as tl: - عسر ب
	-
ford specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The filed.	90th day after the
Manufat	

Filing Fee: \$25.00