

L23000400789

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

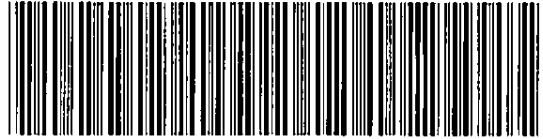
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2023 SEP 25 AM 11:00
SECRETARY OF STATE
TALLAHASSEE, FL

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CMA 30G 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:

Sean Shkolnik

Name of Person

Firm/Company

9497 Old Pine Road

Address

Boca Raton FL 33428

City/State and Zip Code

drseandental@gmail.com

E-mail address: (to be used for future annual report notification)

SECRETARY OF STATE
TALLAHASSEE, FL

2023 SEP 25 AM 11:00

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For further information concerning this matter, please call:

Sean Shkolnik

Name of Person

at (

305)
Area Code

336 4515
Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &
Certificate of Status

☐ \$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
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

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>
VP	Niurka C Snkolnik		<input type="checkbox"/> Add
		9497 Old Pine Road, Boca Raton FL 33428	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
VP	Lila J Shkolnik		<input type="checkbox"/> Add
		9497 Old Pine Road, Boca Raton FL 33428	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
VP	Violet E Shkolnik		<input type="checkbox"/> Add
		9497 Old Pine Road, Boca Raton FL 33428	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Sean Shkolnik	9497 Old Pine Road, Boca Raton FL 33428	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Niurka C Snkolnik	9497 Old Pine Road, Boca Raton FL 33428	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

SECRETARY OF STATE
TALLAHASSEE, FL
2023 SEP 25 AM 11:00

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

2023 SEP 25 AM 11:00
SECRETARY OF STATE
TALLAHASSEE, FL

E. Effective date, if other than the date of filing: _____ (optional)
(If an effective date is indicated, the registrant must file a statement of reasons therefor.)

(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.

Dated September 13

2023

Signature of a member or authorized representative of a member

Sean Shkolnik

Typed or printed name of signee