L23000403294

(Requestor's Name)
(Address)
(Address)
,
(City/State/Zip/Phone #)
(Only/State/Zip/Fillone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer.





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A. PARISHANI OCT 15 2023

COVER LETTER

TO: Registration Section

Tallahassee, FL 32314

Division of Cor	poratións	J		
SUBJECT:	Name of Limi	ted Liability Company		_
				202
The enclosed Articles of	Amendment and fee(s) are sub-	nitted for filing.		2023 OCT -5
Please return all correspo	ondence concerning this matter	to the following:		
	Jordan Goldman			AH II: 32
		Name of Person		: သ
	CGFB LLC			
		Firm/Company		_
	12270 SW 3rd Street, Suite	200		
		Address		
	Plantation, FL 33325			
		City/State and Zip Code		
	aordonez@castlegroup.com			
	E-mail address: (1	o be used for future annual	report notification)	_
For further information c	concerning this matter, please ca	all:		
Annette Ordonez		954 666 at ()	0-1856	
Name o	of Person	Area Code	Daytime Telephone Nun	nber
Enclosed is a check for the	he fallowing amount:			
	-	□ 055 00 PH		o eur e
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fec & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enc	Certi losed) Certi	0 Filing Fee, ficate of Status & fied Copy ional copy is enclosed)
Mailing Addres		Street Ac		
Registration			ation Section	
Division of C P.O. Box 632			n of Corporations ntre of Tallahassee	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION

OF CGFB 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 8/28/2023 and assigned Florida document number _____L23000403294

This amendment is submitted to amend the following:

		
	<u> </u>	
	-	
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address on our recor	ds, <u>enter the na</u>	me of the new regist
12	address on our recor	address on our records, enter the na

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.

City

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>	Type of Action
	Patrick James Donnelly	12270 SW 3rd Street, Suite 200	□Add
		Plantation, FL 33325	Remove
			□Change
	Craig Vaughan	12270 SW 3rd Street. Suite 200	□Add
		Plantation, FL 33325	■Remove
			□Change
			☐Remove
			22 □Add
			□Remove
			Change
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			Change

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	8/28/	2023					
ective date, if other than the offective date is listed, the date must	date of filing:	e prior to dat	e of filing or n	ore than 90 d	_ (option	al) ing AP	orsuant to 605 020
<u>te:</u> If the date inserted in this blo	ck does not meet the	applicable:	statutory filir	ng requireme	nts. this d	ate wi	ill not be listed a
ument's effective date on the De	partment of State's re	coras.					
cord specifies a delayed effective	date, but not an effec	ctive time, a	u 12:01 a.m.	on the earlie	er of: (b)	The 9	90th day after the
s filed.					, ,		•
September 25	2023						
September 25	. 2023	·					
ed September 25	. 2023	·					
ed September 25	Signature of a member of	or authorized	representative	e of a member			