## L23000454902

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## **COVER LETTER**

Registration Section Division of Corporations

Tallahassee, FL 32314

TO:

Captial Cre SUBJECT:	est Investments LLC	·	
SUBJECT;	Name of Lin	nited Liability Company	
The enclosed Articles of	Amir Sadek  Name of Person  Capital Crest Investments LLC  Firm/Company  6550 Carlinga Drive  Address  Pensacola, FL 32507  City/State and Zip Code  sadekamir@aol.com  E-mail address: (to be used for future annual report notification)		
Please return all correspondent	ondence concerning this matter	to the following:	
	Amir Sadek		
	<del></del>	Name of Person	· · · · · · · · · · · · · · · · · · ·
	Capital Crest Investments	LLC	
	<del></del>	Firm/Company	
	6550 Carlinga Drive		
		Address	
	Address		
	sadekamir@aol.com	City/State and Zip Code	
	E-mail address: (	to be used for future annual report noti	fication)
For further information c	oncerning this matter, please c	all:	
Amir Sadek		352 561-1998 at ()	
Name o	f Person	Area Code Daytim	e Telephone Number
Enclosed is a check for th	ne 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 Addres Registration S		Street Address:	nti am
Division of C		Registration Sec Division of Cor	
P.O. Box 632		The Centre of T	5

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Capital Crest Investents LLC		
( <u>Name of the Limited Liability</u> (A Florida)	y Company as it now appears on our records. Limited Liability Company)	)
The Articles of Organization for this Limited Liability Co	ompany were filed on 10/02/2023	and assigned
Florida document number L23000454902		_
This amendment is submitted to amend the following:		
a. If amending name, enter the new name of the limit	ed liability company here:	
he new name must be distinguishable and contain the words "Limit	ed Liability Company," the designation "LLC" of	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRI	ESS)	
Inter new mailing address, if applicable:		· 
Mailing address MAY BE A POST OFFICE BOX)		
3. If amending the registered agent and/or registered gent and/or the new registered office address here:	office address on our records, <u>enter th</u>	e name of the new registe
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	Enter v tortaa street address	
<del></del>	, Flori	
	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 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
AMBR	FLR HOLDINGS LLC	1572 FARRINDON CIR. LAKE MARY, FL 32746	<b>≣</b> Add
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	late of filing:	LA CEV	(optional)	)
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