L23000492386

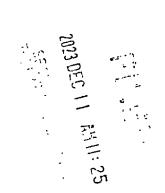
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COVER LETTER

TO: Registration Se Division of Cor			
SUBJECT: CVCFL TE	CCH, LLC		
SOBJECT:	Name of Limited	Liability Company	
The enclosed Articles of	Amendment and fee(s) are submitt	ed for filing.	
Please return all correspo	ondence concerning this matter to the	ne following:	
	Richard W. Smith		
		Name of Person	
	NeJame Law		
		Firm/Company	
	189 S. Orange Ave., Suite 180		
		Address	
	Orlando, FL 32801		
		ity/State and Zip Code	
	richard@nejamelaw.com		
	E-mail address: (to be	e used for future annual report not	ification)
For further information of	concerning this matter, please call:		
Richard W. Smith, Esq.	of Person	at (407) 500-0000 Daytin	ne Telephone Number
Enclosed is a check for t	he following amount:		
■ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	S55.00 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

Street Address:
Registration Section
Division of Corporations The Centre of Tallahassee

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CVCFL TECH, LLC		
(Name of the Limited Liability C (A Florida Lin	ompany as it now appears on our reconted Liability Company)	rds.)
The Articles of Organization for this Limited Liability Com Florida document number L23000492386	pany were filed on 10/27/2023	and assigned
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 "LL	C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRES.	S)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		2023 DI
manning address militiation of the control money		72.22
B. If amending the registered agent and/or registered of agent and/or the new registered office address here:	fice address on our records, <u>ente</u>	r the name of the new register
Name of New Registered Agent:		
New Registered Office Address:	Enter Classida etc J.L.	
	Enter Florida street addr	USS.
···	· · · · · · · · · · · · · · · · · · ·	lorida
	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	Bellows, David		□Add
		1723 Lucerne Terrace, Suite 100 Orlando, FL 32806	=Remove
			□Change
AMBR	Bello, David	1723 Lucerne Terrace, Suite 100, Orlando, FL 32806	Madd
			□Remove
			Change
			□Add
		·-	□Remove
			Change
			□Add
			□Remove
			□Change
			🗆 Add
			Remove
			□Change
			🗆 Add
			□Remove
			□Change

Note	tive date, if other than the date of filing:
he reco	ord 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 filed.
Dated	December 6 2023
	Signature of a member or authorized representative of a member
	Dishard W. Smith. Fra
	Richard W. Smith, Esq. Typed or printed name of signee