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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LEGALZOOM.COM INC.

Account Number : I20010000062 Phone : (323)962-8600

Fax Number : (323)389-0502

**Enter the email address for this business entity to be used for future = annual report mailings. Enter only one email address please. **

Email	Address:			



LLC AMND/RESTATE/CORRECT OR M/MG RESIGN CMV REALTY LLC

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COVER LETTER

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SUBJECT:	CMV REA	NATE OF Limited Liability Company Name of Limited Liability Company Amendment and fee(s) are submitted for filing. Indence concerning this matter to the following: Mike Town Name of Person Legalzoom.com, Inc. Firm/Company 9900 Spectrum Dr Address Austin, TX 78717		
JOBOLC II		Name of Lim	nited Liability Company	
The enclosed	d Articles of a	Amendment and fee(s) are sub	omitted for filing.	
Please return	n all correspo	ndence concerning this matter	to the following:	
		Mike Town		
			Name of Person	
		Legalzoom.com, Inc.		
Firm/Compuny				
			Address	
		Austin, TX 78717		
		viannite@gmail.com	City/State and Zip Code	
		E-mail address: (to be used for future annual report notifica	tion)
For further is	nformation co	ncerning this matter, please ca	all:	
Mike Town			\$00 773-0888	
	Name of	Person	at () Area Code Daytime Te	elephone Number
Enclosed is a	check for the	e following amount:		
□ \$25.00 F	iling 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 Tallahassee, FL 32314

STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Fl. 32301 To.

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILEL
TALLAHASSEF, FLORIO

CMV REALTY LLC

(Name of the Ulmited 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 05/31/2024 ____ and assigned Florida document number L24000250386 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 comain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 8211 West Broward Blvd Ste 230 Enter new principal offices address, if applicable: Plantation, FL 33324 (Principal office address MUST BE A STREET ADDRESS) 8211 West Broward Blvd Stc 230 Enter new mailing address, if applicable: Plantation, FL 33324 (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address . Florida ________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

To:

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

Title	<u>Name</u>	Address	Type of Action
AP	Gustavo A Martinez		□ Add
		4332 SEAGRAPE DR APT 7 LAUDERDALE BY THE SEA, FL 33308	■ Remove
			Change
AMBR	Melissa Vianni		Add
		6768 SW 192ND AVE FORT LAUDERDALE, FL 33332	≅ Remove
			☐ Change
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			☐ Remove
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Effective date, if other than the date of fili f an effective date is listed, the date must be specified	ing:		(optional)	
f an effective date is listed, the date must be specified Note: If the date inserted in this block does not document's effective date on the Department of	t meet the applicable s	o of filing or more than 90 o tatutory filing requirem	lays after filing.) Pursuant tents, this date will not b	o 605.0207 e listed as
ne record specifies a delayed effective The 90th day after the record is filed		effective time, at 1	2:01 a.m. on the e	arlier of
Dated - 8014 9:774	2024	<i></i>		
	1			

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Typed or printed name of signee

Filing Fee: \$25.00