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SECRETARY OF STATE TALLAHASSEE, FL





COVER LETTER

TO: Registration Se Division of Cor						
SUBJECT: CAPC	Caral Range and	Stove LLC ited Liability Company				
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.				
Please return all correspo	ndence concerning this matter	to the following:				
	Christophus	Namo of Person				
	Cape Coral B	arge and Store, LL	(
	3191 College	PKwy Unit 303				
	Ft. Myers,	FC 33919 City/State and Zip Code				
		14 n - 14 W. (on ho be used for future annual report notific		Š	20	
For further information c	oncerning this matter, please ca			ECRE	24 AU	761 C
Christ har	Person Person	at (<u>394</u>) 707 - Area Code Daytime 7	7777 Telephone Number	SECRETARY OF STATE TALLAHASSEE, FL	6 16 PH 2:	
Enclosed is a check for th	ne following amount:			FL	သ္ဟ	
№ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing F Certificate of S Certified Copy (additional copy i	Status &		

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TO:

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Comp (A Florida Limited	of C CC any as it now appears on	our records.)	
(A Florida Limited			
The Articles of Organization for this Limited Liability Company	y were filed on $\frac{6}{}$	04 2024 and assigned	d
Florida document number 24606255813		, ,	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited lial	bility company here;		
The new name must be distinguishable and contain the words "Limited Liab	ility Company," the design	nation "LLC" or the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:			<u></u>
(Principal office address MUST BE A STREET ADDRESS)		·	
	 		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)		20 SE	
		CR TAI	
	, <u> </u>	LA LA	
B. If amending the registered agent and/or registered office	address on our reco	rds. enter the name of the new cry	istered
agent and/or the new registered office address here:		SSE SSE	
		E 2	-
Name of New Registered Agent:		F F 35	
New Registered Office Address:		, m	
	Enter Florida :	street address	
		, Florida	
	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 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>	Name	Address	Type of Action
MGR	Christopher Kagan	8191 (ollege Pkwysjunit 3	<u> </u>
	· ·	8191 (ollege Pkwy., un. + 3 Ft. Myers, Fl. 33919	□ Remove
			□Change
			□ Add
			□Remove
			□Change
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			BECKERARY OF STAR
			Change
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SS CR	P# 2:
Effective date, if other than the date of filing: (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 Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be document's effective date on the Department of State's records.	605,0207 (3)(b
	S 4
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 a ford is filed.	itter the
Dated August 12 2024.	
Signature of a member or authorized representative of a member	
(hristopher Kagen Typed or printed name of signee	-

Filing Fee: \$25.00