

L9900000037

Florida Department of State
Division of Corporations
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To:
Division of Corporations
Fax Number : (850) 617-6383

From:
Account Name : KATZ BASKIES LLC
Account Number : I20080000071
Phone : (561) 910-5700
Fax Number : (561) 910-5701

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

CAPITAL PLANNING GROUP LLC

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T. HAMPTON

SEP - 4 2009

EXAMINER

COVER LETTER

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TO: Registration Section
Division of Corporations

SUBJECT: Capital Planning Group LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Neal A. Slafsky

Name of Person

Capital Planning Group LLC

Firm/Company

6700 N. Andrews Avenue, Suite 605

Address

Fl. Lauderdale, FL 33309

City/State and Zip Code

nslafsky@cpgfl.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Thomas O. Katz

Name of Person

at (561)

910-5700

Area Code & Daytime Telephone Number

Enclosed is a check for the 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 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

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SEP/03/2009/THU 09:06 AM
850-617-6381

KATZ BASKIES

9/3/2009 8:36:51 AM

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FAX No. 561 910 5701

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1/002 Fax Server

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

September 3, 2009

CAPITAL PLANNING GROUP LLC
6700 N. ANDREWS AVENUE
SUITE 605
FORT LAUDERDALE, FL 33309

SUBJECT: CAPITAL PLANNING GROUP LLC
REF: L99000000371

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of a limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. Adding of Florida or Florida to the end of the name is not acceptable. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must end with the words Limited Liability Company, the abbreviation L.L.C., or the designation LLC. The word Limited may be abbreviated as Ltd. and the word Company may be abbreviated as Co. The following suffixes are no longer acceptable: Limited Company, L.C., and LC.

The document number of the name conflict is M06000003569 (CPG HOLDINGS, LLC).

If you have any further questions concerning your document, please call (850) 245-6855.

Tammy Hampton

FAX Aud. #: H09000193899

SEP/03/2009/THU 09:06 AM
850-617-6381

KATZ BASKIES

FAX No. 561 910 5701

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9/3/2009 8:36:52 AM PAGE 2/002 Fax Server

Regulatory Specialist II
Registration/Qualification Section

Letter Number: 409A00029455

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**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Capital Planning Group 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 1/22/1999 and assigned
Florida document number L99000000371

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

CPG Capital LLC

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(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

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 608, 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

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If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

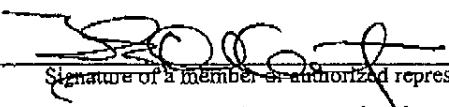
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Dated _____


Signature of a member or authorized representative of a member

Thomas O. Katz

Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00

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