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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : ZIMMERMAN, KISER, & SUTCLIFFE, P.A.
Account Number : I19990000006
Phone : (407)425-7010
Fax Number : (407)425-2747

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

Email Address: corporate@zkslawfirm.com

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
NVC/GP - 103RD STREET, LLC**

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BB 130/21

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: NVO/GP - 103RD STREET, 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:

JESSICA PAPARELLA

Name of Person

ZIMMERMAN, KISER & SUTCLIFFE, P.A.

Firm/Company

315 E. ROBINSON STREET, SUITE 600

Address

ORLANDO, FLORIDA 32801

City/State and Zip Code

JPAPARELLA@ZKSLAWFIRM.COM

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

For further information concerning this matter, please call:

JESSICA PAPARELLA

407

325-7010

at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount.

☒ \$25.00 Filing Fee

☐ \$50.00 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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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NVOGP - 103RD STREET, LLC

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

AMMR = Authorized Member

Title	Name	Address	Type of Action
MGR	VESTCOR, INC.	3030 HARTLEY ROAD	☒ Add
		SUITE 310	☐ Remove
		JACKSONVILLE, FL 32257	☐ Change
MGR	JOHN D. ROOD	3030 HARTLEY ROAD	☐ Add
		SUITE 310	☒ Remove
		JACKSONVILLE, FL 32257	☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change

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

三、

2021 JUL 29 AM 8:57

THE
WITNESS

E. Effective date, if other than the date of filing: _____ (optional)

(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 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at (2:01) a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated July 29 2021

~~Signature of a member or authorized representative of a member~~

JONATHAN L. WOLF

Typed or printed name of signee

Filing Fee: \$25.00