

L13000065208

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

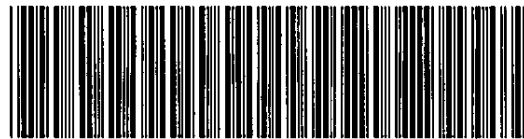
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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14 OCT 22 PM 2:25
CLERK OF STATE
TALLAHASSEE, FLORIDA

OCT 27 2014
T. BROWN

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: NAPEX 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:

ROSA ESTELA MORALES

Name of Person

AXIOM ACCOUNTING, INC

Firm/Company

4951 TAMIAMI TRAIL NORTH SUITE 103

Address

NAPLES, FL 34103

City/State and Zip Code

estelamoraes07@comcast.net

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

For further information concerning this matter, please call:

ROSA ESTELA MORALES

Name of Person

at 239 777-2943

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

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

NAPEX LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

FILED
14 OCT 22 PM 2:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 05/03/2013 and assigned Florida document number L13000065208.

This amendment is submitted to amend the following:

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

N/A

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

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:

AXIOM ACCOUNTING, INC

New Registered Office Address:

4951 TAMiami TRAIL NORTH SUITE 103

Enter Florida street address

NAPLES

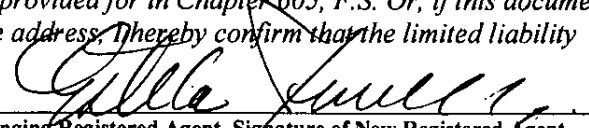
City

, Florida FL 34103

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

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	MARCO, PEREZ	455 8TH STREET NE	☐ Add
		NAPLES, FL 34120	☒ Remove
MGRM	MARCO, PEREZ	455 8TH STREET NE	☒ Add
		NAPLES, FL 34120	☐ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove
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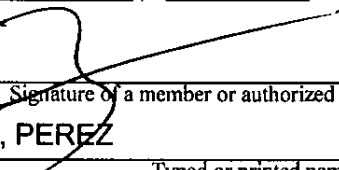
D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

MARCO, PEREZ SHOULD BE MGRM

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

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated October 18, 2014



Signature of a member or authorized representative of a member

MGRM - MARCO, PEREZ

Typed or printed name of signee