## Florida Department of State Pirits for of Corporations Electronic Eiling Cover Sheet

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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number : 110432003053 Phone : (561)694-8107 Fax Number : (561)214-8442

\*\*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 NOBLE LEGAL FIRM, PLLC

Certificate of Status	0
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Page Count	04
Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

NOBLE LEGAL FIRM, PLLC			
(Name of the Limited Liability Comp (A Florida Limited	peny as it now appears on our records.) Liability Company)		
The Articles of Organization for this Limited Liability Company Florida document number L20000293733			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	bility company here:		
The new name must be distinguishable and contain the words 'Limited Liab	ility Company," the designation "LLC" or the abbreviation "L.L.C."		
Enter new principal offices address, if applicable:	10680 strike lane		
(Principal office address MUST BE A STREET ADDRESS)	Bonita springs Florida 34135		
Enter new mailing address, if applicable:	10680 strike lane		
(Mailing address MAY BE A POST OF FICE BOX)	Bonita springs Florida 34135		
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our records, enter the name of the new registered		
Name of New Registered Agent:	2022 HJ		
New Registered Office Address:	The Park		
	Enter Florida street address		
	Cuy, Florida Zir 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 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
MGR	Jennifer Orrcut Angius	25540 Fenner Circle	
		Bonita Springs, FL 34135	_
			Change
MGR	Brianna L. Ayala	10680 strike lane	
		Bonita springs Florida 34135	\ \ \_Remove
			<b>■</b> Change
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			□Remove
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100				_
Effective date, if other that fan effective date is listed, the date inserted in	late projet he ensoring and assure	A Language A Language	(optional	)
Vote: If the date inserted in locument's effective date on	this block does not meet the the Department of State's	e applicable statutory frecords.	r more than 90 days after filing iling requirements, this date	<ul><li>3.) Pursuant to 605.0207</li><li>be will not be listed as</li></ul>
		Sant Commence	on the cost - of a > T	
	ffective date, but not an effe	ecuve time at 12:01 a c		
record specifies a delayed end is filed.	iffective date, but not an eff	ective time, at 12:01 a.:	ii. On the earlier OI; (b)	ne 90th day after the
record specifies a delayed of dis filed.  May 16th	_		n. on the earner of: (b)	ne 90th day after the
	effective date, but not an effective date,		n. on the earner of: (b)	ne 90th day after the
record specifies a delayed of dis filed.  May 16th	_		n. on the earner of: (b)	ne 90th day after the
record specifies a delayed of dis filed.  May 16th	, 12022			ne 90th day after the

Filing Fee: \$25 no