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(((H23000401628 3)))



H230004016283ABC-

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : IDEAS CARVAJAL LLC

Account Number : I20220000006 Phone : (321)333-5565

Fax Number : (407)565-5637

**Enter	the	email a	address	for	this	busine	255	entity	to	be	used	for	future
an	nual	report	: mailin	gs.	Enter	only	one	email	add	res	s ple	ase.	**

Email	Address:	

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN 5766 NONA CREEK LLC

Certificate of Status	0
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Help

COVER LETTER

TO: Registration Se Division of Cor	ection porations		
	A CREEK LLC		
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
	ondence concerning this matter	_	
	BAKHTIARIDASHIRI, A	ALIASGHR	
		Name of Person	
	5766 NONA CREEK LLC		
		Firm/Company	
	13029 BOTTESFORD DE	₹	
		Address	
	ORLANDO, FL 32832		ı. 20
		City/State and Zip Code	23 H
	marijum33@hotmail.com		V 0
	E-mail address:	(to be used for future annual report notification)	21
For further information of	concerning this matter, please of	all:	PH SSE
BAKHTIARIDASHIRI,	ALIASGHR	321 4421235	2023 HOV 21 PH 2: 07
Name o	of Person	Area Code Daytime Telephone N	Tumber -
Enclosed is a check for the	he following amount:		
■ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	Certified Copy Ce (additional copy is enclosed) Cer	.00 Filing Fee, rtificate of Status & rtified Copy ditional copy is enclosed)
Mailing Address Registration		Street Address: Registration Section	
Division of C	Corporations	Division of Corporations	
P.O. Box 632 Tallahassee,		The Centre of Tallahassee 2415 N. Monroe Street, St	
rananassee,	1 11 121 17	zaro in mionide oncel, ot	1110 010

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

5766 NONA CREEK LLC					
(Name of the Limi	ited Liability Compa (A Florida Limited I	ny as it now appears on our Liability Company)	records.)		
The Articles of Organization for this Limited L	Liability Company	were filed on 07/11/2023	3	and assig	gned
Florida document number L23000328418	 ,				
This amendment is submitted to amend the fol	lowing:				
A. If amending name, enter the new name of	of the limited liab	ility company here:			
The new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the designatio	on "LLC" or the abbrev	iation "L.L.	C."
Enter new principal offices address, if appli	cable:				
Principal office uddress MUST BE A STRE	ET ADDRESS)				
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE) B. If amending the registered agent and/or agent and/or the new registered office address.	registered office : ess here;			, 15 	TI TI O registere
Name of New Registered Agent:	MAYORGA A	RGUELLO, MARIA G	_ 		
New Registered Office Address:	13029 BOTTE:	SFORD DR Enter Florida stree	Laddruss		·
	071.1150	Emer Pioriaa şirce.			
	ORLANDO	City	, Florida	Zip Code	
		cny.	4	up Coae	

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
AMBR	Rakhtiari Dashiri, Aliashr	13029 Bottesford Dr Orlando, FL 32832	DAdd
		· 	□Remove
			■ Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
-,			NO VAdd
			Remove 2: BChange
			□Add
			□Remove
			DChange
	<u></u>		□Add
			□ Remove
			Change

mending any other information, enter change(s) here: (Attach additional she	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	
	203
	2023 NO
	V
	(optional) 2:
ective date, if other than the date of filing: effective date is listed, the date must be specific and cannot be prior to date of filing or more than the: If the date inserted in this block does not meet the applicable statutory filing requirations affective date on the Department of State's records.	90 days after filing.) Pursuant to 605.0207
and the state of the properties of other 3 records.	
cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the estilled.	arlier of: (b) The 90th day after the
, 11/21/2023	
ed	
(HOW a proxocell)	
-Signature of a member or authorized representative of a mer	mber

Filing Fee: \$25.00