204000053101

(Re	questor's Name)	
· ·		
(Ad	dress)	
(Ád	dress)	
(Cit	y/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	e)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
		,
		9/2
	Office Use Only	$(\nabla h_{\alpha \alpha})$



100040448881

08/30/04--01051--002 **25.00

OLAUG 30 AM IO: 10

TRANSMITTAL LETTER

TO: Registration Se Division of Co			···-		
SUBJECT: NOV	a Road Prop	perties LLC mited Liability Company)			
	f Amendment and fee(s) are sultondence concerning this matter	_			
-	Ranier	F. Munns Name of Person)			
<u></u>	0	Firm/Company)			
· · · · · · ·	Po Box	2807 (Address)			
	Orlando,	FL 3280Z State and Zip Code)	SECRE A	04 AUG 30	
For further information	concerning this matter, please c	all:	SSEE		
Ranier	F. Muns (Name of Person)	at (407) 57 (Area Code & Daytime	18-9646 e Telephone Number		G
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 e	&)

STREET ADDRESS:

Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Nova Road

(Present Name) (A Florida Limited Liability Company)	
FIRST: The Articles of Organization were filed on July 16, 2004 and assigned document number <u>L04000053101</u> SECOND: The following amendment(s) to the Articles of Organization was/were adopted by the liability company: (2) Amendment(s)	limited
1 - Please add another Managing Member/Manag	jer:
Title:MGR	
Ranier F. Munns	
PO BOX 2807	
Orlando, FL 32802	무 .//
2. Please also change the name from current	name (above
To: Nova Park LLC	0
Dated AUAUST 26, 2004.	
	0
Signature of a member or authorized representative of a member	
Kanier F. Munns Typed or printed name of signee	_

Filing Fee: \$25.00